## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000027103

Entity Name: COASTAL MEDICARE ADVISORS INC

**Current Principal Place of Business:** 

21700 HAMMOCK POINT DR BOCA RATON. FL 33433

**Current Mailing Address:** 

21700 HAMMOCK POINT DR BOCA RATON, FL 33433

FEI Number: 88-1682616 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUZA, JULIANA 21700 HAMMOCK POINT DR BOCA RATON, FL 33433 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Feb 12, 2024

**Secretary of State** 

8199320836CC

## Officer/Director Detail:

Title I

Name SOUZA, JULIANA

Address 21700 HAMMOCK POINT DR
City-State-Zip: BOCA RATON FL 33433

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIANA SOUZA

**PRESIDENT** 

02/12/2024