

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000078943

**Entity Name:** GC HEALTH SOLUTIONS INC

**Current Principal Place of Business:**

1065 W 26TH ST  
APT 4  
HIALEAH, FL 33010

**Current Mailing Address:**

1065 W 26TH ST  
APT 4  
HIALEAH, FL 33010

**FEI Number:** 93-4400825

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CRUZ RODRIGUEZ, GRETTEL D  
1065 W 26TH ST  
APT 4  
HIALEAH, FL 33010 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

**Officer/Director Detail :**

Title MGR  
Name CRUZ RODRIGUEZ, GRETTEL D  
Address 1065 W 26TH ST APT 4  
City-State-Zip: HIALEAH FL 33010

Title AR  
Name RODRIGUEZ HERNANDEZ, BARBARA C  
Address 1065 W 26TH ST APT 4  
City-State-Zip: HIALEAH FL 33010

*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:** GRETTEL DE LA CARIDAD CRUZ RODRIGUEZ

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02/05/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date