

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000067694

**Entity Name:** LUMAR'S HEALTH CARE CORP.

**Current Principal Place of Business:**

8725 N.W. 18TH TERRACE  
SUITE 102  
MIAMI, FL 33172

**Current Mailing Address:**

8725 N.W. 18TH TERRACE  
SUITE 102  
MIAMI, FL 33172 US

**FEI Number:** 65-0523029

**Certificate of Status Desired:** Yes

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

RODRIGUEZ, ZOE M  
11 SW 57TH COURT  
MIAMI, FL 33144 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 ADM  
Name RODRIGUEZ, ZOE M  
Address 11 SW 57 CT  
City-State-Zip: MIAMI FL 33144

*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:** ZOE RODRIGUEZ

**PRESIDENT**

**04/05/2018**

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

\_\_\_\_\_  
Date