

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000007342

**FILED  
Apr 04, 2020  
Secretary of State  
3567515640CC**

**Entity Name:** PALM SPRINGS MEDICAL SERVICES OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

12600 PEMBROKE RD  
SUITE-300  
MIRAMAR, FL 33027

**Current Mailing Address:**

P O BOX 5137  
HIALEAH, FL 33014 US

**FEI Number:** 65-0463205

**Certificate of Status Desired:** No

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

GARCIA, RAMON M  
10185 COLLINS AVE.  
# 803  
BAL HARBOUR, FL 33154 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	PRESIDENT	Title	VICE-PRESIDENT
Name	GARCIA, MARGARITA	Name	GARCIA, RAMON M
Address	12600 PEMBROKE RD SUITE-300	Address	12600 PEMBROKE RD SUITE-300
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	MIRAMAR FL 33027

*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:** MARGARITA GARCIA

**PRESIDENT**

**04/04/2020**

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

\_\_\_\_\_  
Date