

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000066744

**Entity Name:** GERIATRIX SERVICES, INC.

**Current Principal Place of Business:**

4308 ALTON RD, SUITE 420  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

4308 ALTON RD, SUITE 420  
MIAMI BEACH, FL 33140

**FEI Number:** 65-0772315

**Certificate of Status Desired:** No

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

PARDEDES, JUAN CARLOS  
50 OCEAN LN DR.  
APT 202  
KEY BISCAYNE, FL 33149 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 PAREDES, JUAN CARLOS  
Address 50 OCEAN LN DR., APT 202  
City-State-Zip: KEY BISCAYNE FL 33149

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:** JUAN CARLOS PAREDES

**PRESIDENT**

**02/06/2013**

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

\_\_\_\_\_  
Date