

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000029897

Entity Name: RASF CLINICAL RESEARCH, INC.**Current Principal Place of Business:**1050 NW 15TH STREET
212A
BOCA RATON, FL 33486**Current Mailing Address:**1050 NW 15TH STREET
212A
BOCA RATON, FL 33486**FEI Number:** 65-0920331**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DELUCA, ANNETTE
1838 NW 9TH ST
BOCA RATON, FL 33486 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	VP
Name	FORSTOT, JOSEPH Z
Address	1050 NW 15TH STREET
City-State-Zip:	BOCA RATON FL 33486

Title	PRESIDENT
Name	BACA, SHAWN
Address	1050 NW 15TH STREET
City-State-Zip:	BOCA RATON FL 33486

Title	SECRETARY
Name	ALBOUKREK, DAVID
Address	1050 NW 15TH STREET
City-State-Zip:	BOCA RATON FL 33486

Title	DIRECTOR
Name	ULLRICH, KOREY
Address	1050 NW 15TH ST 212A
City-State-Zip:	BOCA RATON FL 33486

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: SHAWN BACA

PRESIDENT

03/20/2023

Electronic Signature of Signing Officer/Director Detail_____
Date