

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062765

Entity Name: CARE TOUCH MEDICAL EQUIPMENT INC.

Current Principal Place of Business:

7556 LAKEWORTH ROAD
SUITE 102
LAKE WORTH, FL 33467

Current Mailing Address:

7556 LAKEWORTH ROAD
SUITE 102
LAKE WORTH, FL 33467 US

FEI Number: 65-0933800

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAPOOR, JATINDER
7556 LAKEWORTH ROAD
SUITE 102
LAKE WORTH, FL 33467 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 PD
Name KAPOOR, JATINDER
Address 9297 OLMSTEAD DRIVE
City-State-Zip: LAKE WORTH FL 33467

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: JATINDER KAPOOR

P,D

03/18/2016

Electronic Signature of Signing Officer/Director Detail

Date