

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V03605

**Entity Name:** GENTLE CARE, INC.

**Current Principal Place of Business:**

1790 SW 27TH AVENUE  
MIAMI, FL 33145

**Current Mailing Address:**

1790 SW 27TH AVENUE  
MIAMI, FL 33145 US

**FEI Number:** 65-0305510

**Certificate of Status Desired:** No

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

REGISTERED AGENT SERVICES CO.  
3211 VINELAND RD  
SUITE 174  
KISSIMMEE, FL 34746 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:** MICHAEL ANGELO REP. FL REGISTERED AGENT

02/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            VELAZQUEZ, HORTENSIA A.  
Address        8013 OLD CUTLER ROAD  
City-State-Zip: CORAL GABLES FL 33143

Title            VP  
Name            VELAZQUEZ, VICTOR A.  
Address        8013 OLD CUTLER ROAD  
City-State-Zip: CORAL GABLES FL 33143

*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:** VICTOR A VELAZQUEZ

VP

02/10/2023

Electronic Signature of Signing Officer/Director Detail

Date