2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2025
Secretary of State
5454379103CC

DOCUMENT# L11000014733

Entity Name: ABSOLUTE HEALTHCARE LLC

Current Principal Place of Business:

3378 MARINER BLVD
SPRING HILL, FL 34608

Current Mailing Address:

3378 MARINER BLVD
SPRING HILL, FL 34608

FEI Number: 30-0692394

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GAURAV, MALHOTRA
15616 BLUE STAR CT
ODESSA, FL 33556 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: GAURAV V MALHOTRA 02/11/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	PRESIDENT
Name	MALHOTRA, GAURAV
Address	15616 BLUE STAR CT
City-State-Zip:	ODESSA FL 33556

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MALHOTRA, GAURAV V PRESIDENT 02/11/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date