

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000367162

Entity Name: HEALTHCARE ANGEL SPA LLC

Current Principal Place of Business:

1836 SW 181 WAY
MIRAMAR, FL 33029

Current Mailing Address:

1836 SW 181 WAY
MIRAMAR, FL 33029

FEI Number: 88-3884010

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILORD, NERLINE
1836 SW 181 WAY
MIRAMAR, FL 33029 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

Authorized Person(s) Detail :

Title CEO
Name MILORD, NERLINE
Address 1836 SW 181 WAY
City-State-Zip: MIRAMAR FL 33029

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: NERLINE MILORD

CEO

04/09/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date