

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003160

**Entity Name:** METROPOLITAN HEALTHCARE SERVICES, INC.

**Current Principal Place of Business:**

555 HERNDON PARKWAY  
SUITE 125  
HERNDON, VA 20170

**Current Mailing Address:**

555 HERNDON PARKWAY  
SUITE 125  
HERNDON, VA 20170

**FEI Number:** 84-1624391

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	CHAIRMAN	Title	CEO
Name	LENTINE, DAVID	Name	DANIEL, EDWARD
Address	555 HERNDON PARKWAY, SUITE 125	Address	555 HERNDON PARKWAY SUITE 125
City-State-Zip:	HERNDON VA 20170	City-State-Zip:	HERNDON VA 20170

*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:** DAVID LENTINE

**CHAIRMAN**

**01/12/2017**

Electronic Signature of Signing Officer/Director Detail

Date