

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005239

Entity Name: AMERICARE RESPIRATORY SERVICES INC

Current Principal Place of Business:

17881 SKY PARK CIRCLE,
SUITE H-J
IRVINE, CA 92614

Current Mailing Address:

17881 SKY PARK CIRCLE,
SUITE H-J
IRVINE, CA 92614 US

FEI Number: 20-0029841

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 P, - CEO
Name MOTE, LLOYD
Address 17881 SKY PARK CIRCLE,
SUITE H-J
City-State-Zip: IRVINE CA 92614

Title VP, - CFO
Name MOTE, JONATHAN
Address 17881 SKY PARK CIRCLE,
SUITE H-J
City-State-Zip: IRVINE CA 92614

Title S
Name MOTE, DONALD
Address 17881 SKY PARK CIRCLE,
SUITE H-J
City-State-Zip: IRVINE CA 92614

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: LLOYD MOTE

CEO

01/08/2021

Electronic Signature of Signing Officer/Director Detail

Date