

**2021 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F20000005729

**Entity Name:** CAREMORE HEALTH MEDICAL PARTNERS EAST PC, CORP

**Current Principal Place of Business:**

4830 W KENNEDY BLVD STE 600  
TAMPA, FL 33609

**Current Mailing Address:**

4830 W KENNEDY BLVD STE 600  
TAMPA, FL 33609 US

**FEI Number:** 85-1771091

**Certificate of Status Desired:** No

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

MCGHEE, PRAVEENA  
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:** PRAVEENA MCGHEE

09/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIR  
Name GADHE, BLAU  
Address 12900 PARK PLAZA DR 7TH FL  
City-State-Zip: CERRITOS CA 90703

Title P  
Name GADHE, BALU  
Address 12900 PARK PLAZA DR 7TH FL  
City-State-Zip: CERRITOS CA 90703

*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:** BALU GADHE

PRESIDENT

09/28/2021

Electronic Signature of Signing Officer/Director Detail

Date