2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2017
Secretary of State
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Entity Name: ABM HEALTHCARE SUPPORT SERVICES, INC.

Current Principal Place of Business:

22622 HARPER AVENUE
ST. CLAIR SHORES, MI 48080

Current Mailing Address:

22622 HARPER AVENUE
ST. CLAIR SHORES, MI 48080 US

FEI Number: 38-2053907

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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	DIRECTOR	Title	DIRECTOR
Name	SALMIRS, SCOTT	Name	SCAGLIONE, DIEGO ANTHONY
Address	22622 HARPER AVENUE	Address	22622 HARPER AVENUE
City-State-Zip:	ST. CLAIR SHORES MI 48080	City-State-Zip:	ST. CLAIR SHORES MI 48080
Title	TREASURER	Title	PRESIDENT
Name	GALLO, THOMAS J.	Name	BOWEN, DANIEL W.
Address	22622 HARPER AVENUE	Address	22622 HARPER AVENUE
City-State-Zip:	ST. CLAIR SHORES MI 48080	City-State-Zip:	ST. CLAIR SHORES MI 48080

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: THOMAS J. GALLO TREASURER 04/12/2017

Electronic Signature of Signing Officer/Director Detail — Date