## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000001526

Entity Name: ICARE USA, INC.

**Current Principal Place of Business:** 

4700 FALLS OF NEUSE ROAD SUITE 245 RALEIGH, NC 27609

**Current Mailing Address:** 

4700 FALLS OF NEUSE ROAD **SUITE 245** RALEIGH, NC 27609 US

FEI Number: 45-3199838 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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

**FILED** Feb 02, 2024

**Secretary of State** 

5696428468CC

## Officer/Director Detail:

PS Title

FLOYD, JOHN Name

809 FAULKNER PLACE Address City-State-Zip: RALEIGH NC 27609

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.

02/02/2024 SIGNATURE: JOHN FLOYD **PRESIDENT**