

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000021471

Entity Name: MARCELAY HEALTH CARE CORP

Current Principal Place of Business:

2754 SE 15 PL
HOMESTEAD, FL 33035

Current Mailing Address:

2754 SE 15 PL
HOMESTEAD, FL 33035

FEI Number: 86-2506656

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARCELAY, MARIA D
2754 SE 15 PL
HOMESTEAD, FL 33035 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
Name ARCELAY, MARIA D
Address 2754 SE 15 PL
City-State-Zip: HOMESTEAD FL 33035

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: ARCELAY MARIA D

OWNER

04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date