



BA20241830436



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
CA NONPROFIT CORPORATION

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20241830436

Date Filed: 10/15/2024

B3118-2421 10/15/2024 5:52 PM Received by California Secretary of State

Entity Details			
Corporation Name	Full Circle Breast Care		
Entity No.	6423241		
Formed In	CALIFORNIA		
Street Address of California Principal Office of Corporation			
Street Address of California Office	91 LAKESHORE IRVINE, CA 92604		
Mailing Address of Corporation			
Mailing Address	91 LAKESHORE IRVINE, CA 92604		
Attention			
Officers			
Officer Name	Officer Address	Position(s)	
+ Zareen Faiz	91 LAKESHORE IRVINE, CA 92604	Chief Executive Officer	
+ Surinder Verma	8 BASCOM IRVINE, CA 92602	Chief Financial Officer, Secretary	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
None Entered			
Agent for Service of Process			
Agent Name	Justin M. Alvarez		
Agent Address	30950 RANCHO VIEJO ROAD SUITE 155 SAN JUAN CAPISTRANO, CA 92675		
Email Notifications			
Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.		
Electronic Signature			
<input checked="" type="checkbox"/> By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.			
Michelle Schumacher		10/15/2024	
Signature		Date	