

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000066723

Entity Name: THERAPARTNERS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

10689 N. KENDALL DRIVE
SUITE 115
MIAMI, FL 33176

Current Mailing Address:

10689 N. KENDALL DRIVE
SUITE 115
MIAMI, FL 33176 US

FEI Number: 65-1022737

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSALES, DR. AMERICO
10689 N. KENDALL DRIVE
SUITE 115
MIAMI, FL 33176 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 D
Name ROSALES, DR. AMERICO
Address 10689 N. KENDALL DRIVE
 SUITE 115
City-State-Zip: MIAMI FL 33176

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: ROSALES, DR. AMERICO

DIRECTOR

03/20/2020

Electronic Signature of Signing Officer/Director Detail

Date