## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000086945

Entity Name: ARMAND MASSAGE THERAPY INC.

#### **Current Principal Place of Business:**

17886 N. US HWY 41 LUTZ, FL 33549

## **Current Mailing Address:**

17886 N. US HWY 41 LUTZ, FL 33549

### FEI Number: 59-3672450

#### Name and Address of Current Registered Agent:

BOYD, MARIE P 17886 N. US HWY 41 LUTZ, FL 33549 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

## Officer/Director Detail :

Title	D	Title	Т
Name	BOYD, MARIE P	Name	BOYD, GREGORY S
Address	17886 N. US HWY 41	Address	17886 N. US HWY 41
City-State-Zip:	LUTZ FL 33549	City-State-Zip:	LUTZ FL 33549

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: MARIE BOYD

OWNER PRESIDENT 02/

02/26/2018

# FILED Feb 26, 2018 Secretary of State CC6366494882

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail

Date

Date