#### 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132138

Entity Name: THERAPEUTIC LIFE CONCEPTS, INC.

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

2999 NE 191ST STREET SUITE 701 AVENTURA, FL 33180

## **Current Mailing Address:**

2999 NE 191ST STREET SUITE 701 AVENTURA, FL 33180 US

## FEI Number: 13-4228254

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

COHEN, MICHELE 2999 NE 191 STREET 701 AVENTURA, FL 33180 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	MICHELE COHEN			02/21/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	SD	
Name	COHEN, MICHELE	Name	KONCSOL, STEPHEN W	
Address	9240 WEST BAY HARBOR DRIVE	Address	13200 SW 32ND COURT	
City-State-Zip:	3C BAY HARBOR ISLANDS FL 33154	City-State-Zip:	DAVIE FL 33330	
City-State-Zip.	DAT HARDOR ISLANDS FL 33134			
Title	VD			
Name	KOEDAM, WILHELMINA S			
Address	1011 HOLLYWOOD BLVD.			
City-State-Zip:	HOLLYWOOD FL 33019			

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: MIICHELE COHEN

PRESIDENT

02/21/2021

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date