## **2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000000689

Entity Name: PEDIATRIC OT, INC.

**Current Principal Place of Business:** 

3031 WINGLEWOOD CIRCLE

LUTZ. FL 33558

**Current Mailing Address:** 

3031 WINGLEWOOD CIRCLE LUTZ. FL 33558 US

FEI Number: 26-3982846 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, CRISTINA R 3031 WINGLEWOOD CIRCLE LUTZ, FL 33558 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

FILED Apr 29, 2025

**Secretary of State** 

7178952730CC

Officer/Director Detail:

Title P Title VP

Name RAMIREZ, CRISTINA R Name RAMIREZ, JAVIER A

Address 3031 WINGLEWOOD CIRCLE Address 3031 WINGLEWOOD CIRCLE

City-State-Zip: LUTZ FL 33558 City-State-Zip: LUTZ FL 33558

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: CRISTINA RENEE RAMIREZ

OWNER/PRESIDENT

04/29/2025