

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000076159

**Entity Name:** BRIGHT THERAPY SERVICES INC.

**Current Principal Place of Business:**

381 NORTH KROME AVE  
206  
HOMESTEAD, FL 33030

**Current Mailing Address:**

14863 SW 139TH ST  
MIAMI, FL 33196 US

**FEI Number:** 47-1852654

**Certificate of Status Desired:** No

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

AGUIRRE, DAYANI  
14863 SW 139TH ST  
MIAMI, FL 33196 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 P  
Name AGUIRRE, DAYANI  
Address 14863 SW 139TH ST  
City-State-Zip: MIAMI FL 33196

*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:** AGUIRRE , DAYANI

**PRESIDENT**

**04/12/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date