

**2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P14000076159

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

**Current Principal Place of Business:**

640 WEST PALM DR  
D  
FLORIDA CITY, FL 33034

**FILED**  
**Aug 18, 2016**  
**Secretary of State**  
**CC4438956111**

**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  
640 WEST PALM DR  
D  
FLORIDA CITY, FL 33034 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

Title            VP  
Name            VALDES, RICARDO  
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:** DAYANI AGUIRRE

**PRESIDENT**

**08/18/2016**

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

\_\_\_\_\_  
Date