SIGNATURE: YULISKA M PEREZ

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000051154

Entity Name: DHB THERAPY, CORP

Current Principal Place of Business:

405 WEST 11TH ST 3 HIALEAH, FL 33010

Current Mailing Address:

405 WEST 11TH ST 3 HIALEAH, FL 33010 US

FEI Number: 47-4264703

Name and Address of Current Registered Agent:

PEREZ, YULISKA M 405 WEST 11TH ST 3 HIALEAH, FL 33010 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 Р PEREZ, YULISKA M Name 405 WEST 11TH ST APT 3 Address City-State-Zip: HIALEAH FL 33010

03/10/2018

FILED Mar 10, 2018 Secretary of State CC5341762551

Certificate of Status Desired: No

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.

PRESIDENT

Date

Date