## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P16000095284

Entity Name: THRIVE THERAPY MIAMI, INC

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

2999 NE 191ST STREET 703 AVENTURA, FL 33180

## **Current Mailing Address:**

2999 NE 191ST STREET 703 AVENTURA, FL 33180 US

### FEI Number: 82-1117080

### Name and Address of Current Registered Agent:

DRIZIN, DEBORAH 2999 NE 191ST STREET 703 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:

Electronic Signature of Registered Agent

### Officer/Director Detail :

TitlePNameDRIZIN, DEBORAHAddress2999 NE 191ST STREET #703City-State-Zip:AVENTURA FL 33180

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

## SIGNATURE: DEBORAH LEAH DRIZIN

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 05, 2019 Secretary of State 7192851308CC

Certificate of Status Desired: No

Date

03/05/2019 Date