

2018 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

Certificate of Status Desired: No

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

Date

Officer/Director Detail :

Title P
Name DRIZIN, DEBORAH
Address 2999 NE 191ST STREET #703
City-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.

SIGNATURE: DEBORAH DRIZIN

MHC MFT

04/11/2018

Electronic Signature of Signing Officer/Director Detail

Date