2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000012608

Entity Name: MARTINEZ THERAPY SERVICES INC

Current Principal Place of Business:

2223 SW 99 AVE MIAMI, FL 33165

Current Mailing Address:

2223 SW 99 AVE MIAMI, FL 33165 US

FEI Number: 82-0983357 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, NERVY 2223 SW 99 AVE MIAMI, FL 33165 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: NERVY MARTINEZ 02/02/2018

Electronic Signature of Registered Agent

Date

FILED Feb 02, 2018

Secretary of State

CC8610718903

Officer/Director Detail:

Title P Title 5

Name MARTINEZ, NERVY Name GONZALEZ, YUNIESKY FONSECA

 Address
 2223 SW 99 AVE
 Address
 2223 SW 99 AVE

 City-State-Zip:
 MIAMI FL 33165
 City-State-Zip:
 MIAMI FL 33165

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.