## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000063535

Entity Name: HM PROFESSIONAL THERAPY, INC.

**Current Principal Place of Business:** 

2390 W LAKEWOOD RD. WEST PALM BEACH. FL 33406

**Current Mailing Address:** 

2390 W LAKEWOOD RD.

WEST PALM BEACH. FL 33406 US

FEI Number: 82-2507769 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, HERIAN 2390 W LAKEWOOD RD. WEST PALM BEACH, FL 33406 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

FILED Mar 18, 2018

**Secretary of State** 

CC4572148194

## Officer/Director Detail:

Title F

Name MARTINEZ, HERIAN
Address 2390 W LAKEWOOD RD.

City-State-Zip: WEST PALM BEACH FL 33406

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.

Electronic Signature of Signing Officer/Director Detail