

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000070433

**Entity Name:** FORT MYERS MASSAGE THERAPY, INC.

**Current Principal Place of Business:**

12734 KENWOOD LN.  
SUITE 31  
FORT MYERS, FL 33907

**Current Mailing Address:**

12734 KENWOOD LN.  
SUITE 31  
FORT MYERS, FL 33907 US

**FEI Number:** 82-2580934

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MAHARJAN DANGOL, ANILA  
12734 KENWOOD LN.  
SUITE 31  
FORT MYERS, FL 33907 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, SEC, DIRECTOR, TREASURER,  
DEM  
Name MAHARJAN DANGOL, ANILA  
Address 12734 KENWOOD LN.  
SUITE 31  
City-State-Zip: FORT MYERS FL 33907

*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:** ANILA MAHARJAN DANGOL

P, SEC, DIRECTOR,  
TRESURER, DEM

03/18/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date