

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000056245

Entity Name: MED THERAPY & SPA, INC.

Current Principal Place of Business:

7241 SW 63RD AVENUE
SUITE 201
MIAMI, FL 33143

Current Mailing Address:

7241 SW 63RD AVENUE
SUITE 201
MIAMI, FL 33143

FEI Number: 83-1033686

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEREZ, LUIS R SR
5141 SW 4 STREET
MIAMI, FL 33134 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	Title	VP
Name	PEREZ, LUIS R SR	Name	SARDINA, ROBERT JR
Address	5141 SW 4 STREET	Address	5141 SW 4 STREET
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI FL 33134

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: ROBERT SARDINA

VP

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date