

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000079824

**Entity Name:** JASEMIN ABA THERAPY CORP.

**Current Principal Place of Business:**

6536 SW 134 PL.  
MIAMI, FL 33183

**Current Mailing Address:**

6536 SW 134 PL.  
MIAMI, FL 33183 US

**FEI Number:** 83-1971161

**Certificate of Status Desired:** No

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

HABER TORRES, NATHALIE S  
6536 SW 134 PL.  
MIAMI, FL 33183 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:** NATHALIE HABER TORRES

03/28/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HABER TORRES, NATHALIE  
Address 6536 SW 134 PL.  
City-State-Zip: MIAMI FL 33183

*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:** HABER TORRES , NATHALIE

P

03/28/2020

Electronic Signature of Signing Officer/Director Detail

Date