

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000092015

Entity Name: SMILEY SPEECH THERAPY INC

Current Principal Place of Business:

948 NE 37TH AVE
HOMESTEAD, FL 33033

Current Mailing Address:

948 NE 37TH AVE
HOMESTEAD, FL 33033 US

FEI Number: 83-2474503

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALDES, ZULEYVI
948 NE 37TH AVE
HOMESTEAD, FL 33033 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/S
Name VALDES, ZULEYVI
Address 948 NE 37TH AVE
City-State-Zip: HOMESTEAD FL 33033

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: ZULEYVI VALDES

PRESIDENT

06/07/2020

Electronic Signature of Signing Officer/Director Detail

Date