

P090000039892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

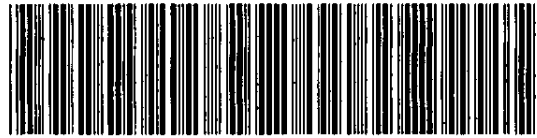
(Business Entity Name)

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Malave, Erin M.

From: 111@hushmail.com
Sent: Tuesday, January 26, 2010 7:43 PM
To: CorpAddressChange
Subject: Principal Address Change

I would like to change the Principal address of Miami-Dade Therapy Associates (Doc# P09000039892) from 555 N.E. 34th Street #2104, Miami, Fl 33137 to 5593 SW 8th Street, ~~Miami, Florida~~ 33134.

If you have further questions please contact me.

John Romano
President
(305) 772-2768