

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000008921

Entity Name: CLOUDBASE THERAPY, INC.

Current Principal Place of Business:

5800 MARGATE BLVD
APT 812
MARGATE, FL 33063

Current Mailing Address:

5800 MARGATE BLVD
APT 812
MARGATE, FL 33063 US

FEI Number: 47-5261187

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE MIRANDA GRANZOTI, RENATO
5800 MARGATE BLVD
APT 812
MARGATE, FL 33063 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: RENATO DE MIRANDA GRANZOTI

08/29/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DE MIRANDA GRANZOTI, RENATO
Address 5800 MARGATE BLVD
 APT 812
City-State-Zip: MARGATE FL 33063

Title S
Name SANTOS DE OLIVEIRA, CARLA
Address 5800 MARGATE BLVD #812
City-State-Zip: MARGATE FL 33063

Title V
Name CORREA, KENNETH
Address 5800 MARGATE BLVD #812
City-State-Zip: MARGATE FL 33063

Title T
Name DE MIRANDA GRANZOTI, RENATO
Address 5800 MARGATE BLVD #812
City-State-Zip: MARGATE FL 33063

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RENATO DE MIRANDA GRANZOTI

PRESIDENT

08/29/2017

Electronic Signature of Signing Officer/Director Detail

Date