## **2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H96645

Entity Name: GARRISON'S PROSTHETIC SERVICE, INC.

FILED
Jan 17, 2018
Secretary of State
CC4201355994

**Current Principal Place of Business:** 

17184 N.E. 19TH AVENUE

NORTH MIAMI BEACH, FL 33162

## **Current Mailing Address:**

17184 N.E. 19TH AVENUE

NORTH MIAMI BEACH, FL 33162

FEI Number: 59-2634748 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GARRISON, KEVIN S 17184 N.E. 19TH AVENUE NORTH MIAMI BEACH, FL 33162 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 PRES

Name GARRISON, KEVIN S Address 17184 NE 19TH AVENUE

City-State-Zip: NORTH MIAMI BEACH FL 33162

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.