

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029680

Entity Name: KIDPRO THERAPIES, INC.

Current Principal Place of Business:

10702 SW ELSINORE DRIVE
PORT SAINT LUCIE, FL 34987

Current Mailing Address:

10702 SW ELSINORE DRIVE
PORT SAINT LUCIE, FL 34987 US

FEI Number: 51-0497902

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILD, JENNIFER
10702 SW ELSINORE DRIVE
PORT SAINT LUCIE, FL 34987 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: JENNIFER WILD

04/14/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WILD, JENNIFER
Address 10702 SW ELSINORE DRIVE
City-State-Zip: PORT SAINT LUCIE FL 34987

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: JENNIFER WILD

PRESIDENT

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date