# 2016 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P11000060529

Entity Name: HEALTH THERAPY CENTER CORP

# **Current Principal Place of Business:**

200 SOUTH BISCAYNE BLVD. **SUITE 2790** MIAMI, FL 33131

# **Current Mailing Address:**

200 SOUTH BISCAYNE BLVD. **SUITE 2790** MIAMI, FL 33131 US

## FEI Number: 90-0740335

#### Name and Address of Current Registered Agent:

MONTES DE OCA, YANIO A 9099 SW 133 CT D MIAMI, FL 33186 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: YANIO A MONTES DE OCA

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	P
Name	MONTES DE OCA, YANIO A
Address	200 SOUTH BISCAYNE BLVD. SUITE 2790
City-State-Zip:	MIAMI FL 33131

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.

PRESIDENT

SIGNATURE: YANIO A MONTES DE OCA

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/07/2016 Date

04/07/2016

Date