

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000090785

Entity Name: ACTIVE LIFE THERAPY SERVICES, INC

Current Principal Place of Business:

8451 WOODBRIAR CT
SARASOTA, FL 34238

Current Mailing Address:

8451 WOODBRIAR DR
SARASOTA, FL 34238

FEI Number: 45-3988638

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAHROUS, SAMUEL
8451 WOODBRIAR DR
SARASOTA, FL 34238 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 PD
Name MAHROUS, SAMUEL
Address 8451 WOODBRIAR DR
City-State-Zip: SARASOTA FL 34238

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: SAMUEL MAHROUS

OWNER

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date