

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000058095

Entity Name: ML PHYSICAL THERAPY, CORP.

Current Principal Place of Business:

8775 NW 153 TERR
MIAMI LAKES, FL 33018

Current Mailing Address:

8775 NW 153 TERR
MIAMI LAKES, FL 33018

FEI Number: 45-5623640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, MANUEL ANTONIO
8775 NW 153 TERR
MIAMI LAKES, FL 33018 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 D/P
Name FERNANDEZ, MANUEL ANTONIO
Address 8775 NW 153 TERR
City-State-Zip: MIAMI LAKES FL 33018

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: MANUEL ANTONIO FERNANDEZ

ACCOUNTANT

01/21/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date