

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000083206

Entity Name: THERACHOICE, INC.

Current Principal Place of Business:

111 2ND AVE N.E.
#900
ST. PETE, FL 33701

Current Mailing Address:

111 2ND AVE N.E.
#900
ST. PETE, FL 33701 US

FEI Number: 46-1122890

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, ELANDA E
729 26TH AVE. NORTH
ST. PETERSBURG, FL 33704 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 OFFICER
Name DIAZ, ELANDA ELODIANE
Address 111 2ND AVE N.E.
 #900
City-State-Zip: ST. PETE FL 33701

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: ELANDA E DIAZ

DIRECTOR

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date