

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000054196

Entity Name: KIDSCARE THERAPY CENTER INC.

Current Principal Place of Business:

1140 W 50 ST
HIALEAH, FL 33012

Current Mailing Address:

1140 W 50 ST
SUITE 303
HIALEAH, FL 33012 US

FEI Number: 46-3053120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORAMAS, PEDRO
1140 W 50 ST
SUITE 303
HIALEAH, FL 33012 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 PRESIDENT
Name ORAMAS, PEDRO
Address 1140 W 50 ST
 SUITE 303
City-State-Zip: HIALEAH FL 33012

Title VICE PRESIDENT
Name ORAMAS, PAULA
Address 1140 W 50 ST
 SUITE 303
City-State-Zip: HIALEAH FL 33012

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: PEDRO ORAMAS

CEO

02/10/2025

Electronic Signature of Signing Officer/Director Detail

Date