## **2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000083992

Entity Name: THERAPY305 INC.

**Current Principal Place of Business:** 

3551 SW 139TH CT

MIAMI, FL 33175

## **Current Mailing Address:**

3551 SW 139TH CT MIAMI, FL 33175 US

FEI Number: 47-2060667 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRUZ, LUIS 3551 SW 139TH CT MIAMI, FL 33175 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

**FILED** Apr 15, 2021

**Secretary of State** 

9805349262CC

## Officer/Director Detail:

Title

Name CRUZ, LUIS

Address 3551 SW 139TH CT City-State-Zip: MIAMI FL 33175

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.

04/15/2021 SIGNATURE: LUIS CRUZ **PRESIDENT**