

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000009532

**Entity Name:** GUZMAR THERAPY MASSAGE, INC.

**Current Principal Place of Business:**

175 FONTAINEBLEAU BLVD  
SUITE 2G  
MIAMI, FL 33172

**Current Mailing Address:**

175 FONTAINEBLEAU BLVD  
SUITE 2G  
MIAMI, FL 33172 US

**FEI Number:** 81-5288807

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GUZMAN, ALBERTO MR.  
175 FONTAINEBLEAU BLVD  
SUITE 2G  
MIAMI, FL 33172 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 P  
Name GUZMAN, ALBERTO MR.  
Address 175 FONTAINEBLEAU BLVD  
SUITE 2G  
City-State-Zip: MIAMI FL 33172

Title VP  
Name MARTINEZ, ODALYS MRS.  
Address 175 FONTAINEBLEAU BLVD  
SUITE 2G  
City-State-Zip: MIAMI FL 33172

*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:** ALBERTO GUZMAN

**PRESIDENT**

**04/08/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date