

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000059912

Entity Name: ELVELIZ PHYSICAL THERAPY INCORPORATED

Current Principal Place of Business:

16884 SW 144 PLACE
MIAMI, FL 33177

Current Mailing Address:

16884 SW 144 PLACE
MIAMI, FL 33177

FEI Number: 82-2205665

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, EDGAR
16884 SW 144 PLACE
MIAMI, FL 33177 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,D
Name LOPEZ, EDGAR
Address 16884 SW 144 PLACE
City-State-Zip: MIAMI FL 33177

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: EDGAR LOPEZ

OWNER

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date