

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000080549

Entity Name: LISERVICES & THERAPY CORP

Current Principal Place of Business:

609 W 35 STREET
HIALEAH, FL 33012

Current Mailing Address:

609 W 35 STREET
HIALEAH, FL 33012 US

FEI Number: 82-3027832

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FRANCES, MAYTE ALFONSO
609 W 35 STREET
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 SEC,P
Name ALFONSO FRANCES, MAYTE
Address 609 W 35 STREET
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: MAYTE ALFONSO FRANCES

PRESIDENT

04/22/2018

Electronic Signature of Signing Officer/Director Detail

Date