

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000069207

Entity Name: KS THERAPY SERVICES CORP

Current Principal Place of Business:

940 NW 44TH AVENUE
UNIT #106
MIAMI, FL 33126

Current Mailing Address:

P.O.BOX 260052
MIAMI, FL 33126 US

FEI Number: 83-1539595

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANCHEZ, KENIA I
940 NW 44TH AVENUE
UNIT #106
MIAMI, FL 33126 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 SANCHEZ, KENIA I
Address 940 NW 44TH AVENUE #106
City-State-Zip: MIAMI FL 33126

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: KENIA I SANCHEZ

PREISIDENT

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date