

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000040540

Entity Name: REVIVAL HEALTH GROUP, P.A.

Current Principal Place of Business:

2396 EDGEWOOD AVE N
JACKSONVILLE, FL 32254

Current Mailing Address:

2396 EDGEWOOD AVE N
JACKSONVILLE, FL 32254

FEI Number: 86-3775256

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIPPA, JAMES
2396 EDGEWOOD AVE N
JACKSONVILLE, FL 32254 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 PTSD
Name RIPPA, JAMES
Address 2396 EDGEWOOD AVE N
City-State-Zip: JACKSONVILLE FL 32254

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: JAMES RIPPA

OWNER

03/24/2025

Electronic Signature of Signing Officer/Director Detail

Date