

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000072083

Entity Name: THERAPY CONCEPTS & ME, INC.

Current Principal Place of Business:

1451 SUNSET DRIVE. SUITE 205
CORAL GABLES, FL 33143

Current Mailing Address:

1451 SUNSET DRIVE. SUITE 205
CORAL GABLES, FL 33143 US

FEI Number: 87-2906449

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FREEMAN, FELICIA E
10722 SW 145 STREET
MIAMI, FL 33176 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 PRES
Name FREEMAN, FELICIA
Address 10722 SW 145 STREET
City-State-Zip: MIAMI FL 33176

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: FELICIA FREEMAN

PRESIDENT

04/05/2022

Electronic Signature of Signing Officer/Director Detail

Date