

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000080773

Entity Name: SUPERIOR RELIEF THERAPY CORP**Current Principal Place of Business:**2701 W. OAKLAND PARK BLVD., SUITE 414
OAKLAND PARK, FL 33311**Current Mailing Address:**2701 W. OAKLAND PARK BLVD., SUITE 414
OAKLAND PARK, FL 33311 US**FEI Number:** 92-1151691**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARCOS JACINTO GONZALEZ GARCIA
2701 W. OAKLAND PARK BLVD.
SUITE 414
OAKLAND PARK, FL 33311 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	Title	S
Name	MARCOS JACINTO GONZALEZ GARCIA	Name	NIELS MOLEIRO
Address	2701 W. OAKLAND PARK BLVD., SUITE 414	Address	2701 W. OAKLAND PARK BLVD., SUITE 414
City-State-Zip:	OAKLAND PARK FL 33311	City-State-Zip:	OAKLAND PARK FL 33311

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: MARCOS GONZALEZ

PRESIDENT

02/02/2023

Electronic Signature of Signing Officer/Director Detail_____
Date