

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000087040

Entity Name: GINGE MASSAGE & THERAPIES, INC.

Current Principal Place of Business:

7147 CHARLESTON PT. DR
LAKE WORTH, FL 33467

Current Mailing Address:

7147 CHARLESTON PT. DR.
LAKE WORTH, FL 33467

FEI Number: 65-0806683

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVERSTEIN, IRA SCOT ESQ
2900 CYPRESS CREEK ROAD
6
FT. LAUDERDALE , FL 33309 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 MR
Name SILVERSTEIN, JEFFREY M
Address 7147 CHARLESTON PT. DR.
City-State-Zip: LAKE WORTH FL 33467

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: JEFFREY SILVERSTEIN

PRESIDENT

01/26/2016

Electronic Signature of Signing Officer/Director Detail

Date