

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000027443

**Entity Name:** COMPREHENSIVE HEALTH & MOTION, LLC

**Current Principal Place of Business:**

8311 N. 37TH ST.  
TAMPA, FL 33604

**Current Mailing Address:**

8311 N. 37TH ST.  
TAMPA, FL 33604 US

**FEI Number:** 81-5288824

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

JEAN-PIERRE, VLADIMYR  
8311 N. 37TH ST.  
TAMPA, FL 33604 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

**Authorized Person(s) Detail :**

Title AMBR  
Name JEAN-PIERRE, VLADIMYR  
Address 8311 N. 37TH ST.  
City-State-Zip: TAMPA FL 33604

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** VLADIMYR JEAN-PIERRE

**OWNER**

**09/20/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date