

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000328292

Entity Name: CAPE PHYSICAL THERAPY LLC

Current Principal Place of Business:

17348 NW 74TH AVE.
APT. 102
MIAMI, FL 33015

Current Mailing Address:

17348 NW 74TH AVE.
APT. 102
MIAMI, FL 33015 US

FEI Number: 85-3637086

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VENEREO, MAYDELIS P DPT
17348 NW 74TH AVE.
APT. 102
HIALEAH, FL 33015 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 VENEREO, MAYDELIS P DPT
Address 17348 NW 74TH AVE., APT. 102
City-State-Zip: MIAMI FL 33015

Title AMBR
Name ROBLES ROLDAN, YOSDEL
Address 17348 NW 74TH AVE APT 102
City-State-Zip: HIALEAH FL 33015

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: YOSDEL ROBLES ROLDAN

AMBR

03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date