

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000458307

Entity Name: REWARD THERAPY, LLC

Current Principal Place of Business:

14773 SW 65TH TER
MIAMI, FL 33193

Current Mailing Address:

14773 SW 65TH TER
MIAMI, FL 33193 US

FEI Number: 92-0893193

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRUZ ZALDIVAR, ZULET
14773 SW 65TH TER
MIAMI, FL 33193 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 MGR
Name CRUZ ZALDIVAR, ZULET
Address 14773 SW 65TH TER
City-State-Zip: MIAMI FL 33193

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: ZULET CRUZ ZALDIVAR

PRESIDENT

04/09/2025

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date