## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000022159

Entity Name: HEAL PHYSICAL THERAPY, INC

**Current Principal Place of Business:** 

7270 NW 12 ST SUITE 440 MIAMI, FL 33126

## **Current Mailing Address:**

7270 NW 12 ST SUITE 440 MIAMI, FL 33126 US

FEI Number: 86-2558312 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FLORES, IRAIMA 7270 NW 12 ST SUITE 440 MIAMI, FL 33126 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: IRAIMA FLORES 04/20/2023

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title PD

Name FLORES, IRAIMA
Address 7270 NW 12 ST
SUITE 440

City-State-Zip: MIAMI FL 33126

SIGNATURE: FLORES, IRAIMA

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.

Ρ

Electronic Signature of Signing Officer/Director Detail

04/20/2023

FILED Apr 20, 2023

**Secretary of State** 

0093223888CC

Date