

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000054037

Entity Name: MYO-THERAPIES, INC.

FILED
Mar 22, 2012
Secretary of State

Current Principal Place of Business:

4450 NE 20TH AVE
OALKAND PARK, FL 33308

New Principal Place of Business:

4149 SO PINE ISLAND RD.
DAVIE, FL 33328

Current Mailing Address:

856 NE 37TH ST.
APT 2
OALKAND PARK, FL 33334

New Mailing Address:

4149 SO PINE ISLAND RD.
DAVIE, FL 33328

FEI Number: 20-4696668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DINICOLAS, MARY LOU
4450 NE 20TH AVE
OAKLAND PARK, FL 33308 US

Name and Address of New Registered Agent:

DINICOLAS, MARY LOU
4149 SO PINE ISLAND RD.
DAVIE, FL 33328 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:

03/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: DINICOLAS, MARY LOU
Address: 4149 SO PINE ISLAND RD.
City-St-Zip: DAVIE, FL 33328

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: ML DINICOLAS

PRES

03/22/2012

Electronic Signature of Signing Officer or Director

Date