

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000019837

FILED  
Feb 10, 2012  
Secretary of State

Entity Name: THERAPY SPOT INC

**Current Principal Place of Business:**

7100 CAMINO REAL  
SUITE #201  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

7100 CAMINO REAL  
SUITE #201  
BOCA RATON, FL 33433

**New Mailing Address:**

FEI Number: 20-8295911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WELLER, MONICA  
4 GLAMIS WAY  
BOYNTON BEACH, FL FL US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WELLER, MONICA  
Address: 4 GLAMIS WAY  
City-St-Zip: BOYNTON BEACH, FL 33426

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: MONICA M. WELLER

P

02/10/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date