2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# P08000040260

Entity Name: ARCHER PHYSICAL THERAPY & PILATES INSTITUTE, INC.

Current Principal Place of Business:

19300 WEST DIXIE HIGHWAY STE 5
NORTH MIAMI BEACH, FL 33180

New Principal Place of Business:

Current Mailing Address:

19300 WEST DIXIE HIGHWAY STE 5
NORTH MIAMI BEACH, FL 33180

New Mailing Address:

FEI Number: 26-2477353 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STANDER, ALAN CPA
6601 NW 14TH STREET
SUITE 3
PLANTATION, FL 33313 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: PRES
Name: SIMAN-TOV, KERRY
Address: 19300 WEST DIXIE HIGHWAY SUITE 5
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: VP
Name: SOLARES, EMILIO
Address: 19300 WEST DIXIE HIGHWAY SUITE 5
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: TRES
Name: SIMAN-TOV, KERRY
Address: 19300 WEST DIXIE HIGHWAY SUITE 5
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: SEC
Name: SIMAN-TOV, KERRY
Address: 19300 WEST DIXIE HIGHWAY SUITE 5
City-St-Zip: NORTH MIAMI BEACH, FL 33180

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: KERRY SIMAN-TOV PRES 04/20/2011

Electronic Signature of Signing Officer or Director — Date