

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000071695

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** PREFERRED PHYSICAL THERAPY INC.

**Current Principal Place of Business:**

7910 NW 25 ST #207  
MIAMI, FL 33122 US

**New Principal Place of Business:**

7910 NW 25 ST  
207  
MIAMI, FL 33122 US

**Current Mailing Address:**

7910 NW 25 ST #207  
MIAMI, FL 33122 US

**New Mailing Address:**

7910 NW 25 ST  
207  
MIAMI, FL 33122 US

**FEI Number:** 45-3124010

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DORIGO, ROMINA G  
3450 LAKESIDE DRIVE  
101  
MIRAMAR, FL 33027 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: DORIGO, ROMINA G  
Address: 3450 LAKESIDE DRIVE  
City-St-Zip: MIRAMAR, FL 33027 US

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: ROMINA DORIGO

P

04/09/2012

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

\_\_\_\_\_  
Date