2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000091213

Entity Name: RESPIRATORY THERAPIST ASSOCIATES, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
11260 NW PLANTAT	/ 22 ST ION ACRES, F	FL 33323			
Current Mailing Address:			New Mailing Address:		
11260 NW PLANTAT	/ 22 ST ION ACRES, F	FL 33323			
FEI Number	: 65-0954789	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
			purpose of changing its registered	d office or registered agent, or both,	
	e of Florida.		pp		
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	jent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CASTEEL, BRI 11260 NW 22		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (BURNS, HARR 2402 SCOTT S HOLLYWWOO	т	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN E. CASTEEL PRES 04/23/2007