

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120388

FILED
Mar 02, 2011
Secretary of State

Entity Name: CYPRESS THERAPY CENTER, INC.

Current Principal Place of Business:

150 SOUTHEAST ROADWAY
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

1688 E 16 STREET
2 FL SUITE 5
BROOKLYN, NY 11229

New Mailing Address:

FEI Number: 20-0340209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILENGER, FELIX
21142 NE 31 PLACE
AVENTURA, FL 33180 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: FILENGER, FELIX
Address: 21142 NE 31 PLACE
City-St-Zip: AVENTURA, 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: FELIX FILENGER

P

03/02/2011

Electronic Signature of Signing Officer or Director

Date