

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000019404

Entity Name: INTERACTIVE THERAPY SOLUTIONS INC

Current Principal Place of Business:

655 IVES DAIRY RD
SUITE 407
NORTH MIAMI, FL 33179

Current Mailing Address:

655 IVES DAIRY ROAD
SUITE 407
MIAMI, FL 33179 US

FEI Number: 45-4650353

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

M&L ACCOUNTING SERVICES INC
16969 NW 67TH AVENUE
SUITE 201
HIALEAH, FL 33015 US

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

Officer/Director Detail :

Title PRESIDENT
Name THOMAS, ANTONIA
Address 655 IVES DAIRY RD
 SUITE 407
City-State-Zip: NORTH MIAMI FL 33179

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: ANTONIA THOMAS

PRESIDENT

03/29/2013

Electronic Signature of Signing Officer/Director Detail

Date