

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003230

Entity Name: OXThera, INC.

FILED
Feb 09, 2011
Secretary of State

Current Principal Place of Business:

13709 PROGRESS BLVD.
ROOM N148
ALACHUA, FL 32615

New Principal Place of Business:

13709 PROGRESS BLVD.
ROOM N130
ALACHUA, FL 32615

Current Mailing Address:

13709 PROGRESS BLVD.,
BOX 17
ALACHUA, FL 32615

New Mailing Address:

PO BOX 907
FORT WHITE, FL 32038

FEI Number: 37-1510607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: HEIMER, JON
Address: PO BOX 907
City-St-Zip: FORT WHITE, FL 32038 US

Title: TS
Name: DESON, TRACY M
Address: PO BOX 907
City-St-Zip: FORT WHITE, FL 32038 US

Title: CSO
Name: SIDHU, HARMEET DR
Address: PO BOX 907
City-St-Zip: FORT WHITE, FL 32038 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: TRACY M. DESON

TS

02/09/2011

Electronic Signature of Signing Officer or Director

Date