

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K60905

FILED
Jan 04, 2007
Secretary of State

Entity Name: THE CENTER FOR MASSAGE THERAPY, COOPER CITY, INC.

Current Principal Place of Business:

1415 SAINT CABRIELLE LANE, #3707
WESTON, FL 33326 US

New Principal Place of Business:

9850 STIRLING RD
SUITE #102
COOPER CITY, FL 33024 US

Current Mailing Address:

9850 STIRLING ROAD, #102
COOPER CITY, FL 33024

New Mailing Address:

9850 STIRLING ROAD,
SUITE #102
COOPER CITY, FL 33024 US

FEI Number: 65-0102601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRETTA, DENNIS P.
1415 SAINT GABRIELLE LANE, #3707
WESTON, FL 33326 US

Name and Address of New Registered Agent:

FARRETTA, DENNIS P.
1501 SE 15TH ST.
UNIT 1-1
FT. LAUDERDALE, FL 33316 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

01/04/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARRETTA, DENNIS P
Address: 1415 SAINT GABRIELLE LANE
City-St-Zip: WESTON, FL 33326

Title: DST () Delete
Name: FARRETTA, JODI L
Address: 1415 SAINT GABRIELLE LANE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FARRETTA, DENNIS P
Address: 1501 SE 15TH ST. UNIT 1-1
City-St-Zip: FT. LAUDERDALE, FL 33316 US

Title: DST (X) Change () Addition
Name: FARRETTA, JODI L
Address: 1501 SE 15TH ST. UNIT 1-1
City-St-Zip: FT. LAUDERDALE, FL 33316 US

I hereby certify that the information supplied with this filing does not qualify for the 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: DENNIS P. FARRETTA

P

01/04/2007

Electronic Signature of Signing Officer or Director

Date