

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000006852

FILED
Apr 30, 2012
Secretary of State

Entity Name: MY THERAPY SOLUTIONS, LLC

Current Principal Place of Business:

12801 SW 149 ST
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

12801 SW 149 ST
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 27-1686235 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LA, YOUNG M MR.
12801 SW 149 ST
MIAMI, FL 33186 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LA, YOUNG M
Address: 12801 SW 149 ST
City-St-Zip: MIAMI, FL 33186 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: YOUNG MIN LA MGR 04/30/2012

_____ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date