## FILE HOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

### DOCUMENT # **L68988** 1. Corporation Name

### LICENSED MASSAGE THERAPY INC.

# **FILED** Feb 06, 1999 8:00am **Secretary of State**

02-06-1999 90023 008 \*\*\*150.00



Principal Place	of Business	Mailing Address						
6325 PRESIDENT	TIAL COURT	6325 PRESIDENTIAL COURT						
SUITE 7B		SUITE 7B		DO NOT WRITE IN THIS SPACE				
FT MYERS FL 3	3919	FT MYERS FL 33919			3. Date Incorporated or Qualifed		,	
US		US			,			
· .					04/30/1990 4. FEI Number		pplied For	_
2. Principal Pla	ace of Business	2a. Mailing Address			–	<del></del>	ot Applicable	1
21		26			65-0208096		Additional	34.94
Suite, Apt. #	¥, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Required	
22		27						
City & State	•	City & State			6. Election Campaign Financing	1	May Be I to Fees	
23		28			, Trust Fund Contribution		I to rees	ļ .
Zip	Country	Zip	ᆫ	шу	8. This corporation owes the current	year intangible ☐ Yes	□No	
24	. 25		0		Personal Property Tax.  10. Name and Address of New Reg			
	9. Name and Address of Current	Registered Agent		81 Name	IV. Name and Address of New Reg	istered Agom		
00/5	CITIO DADI A ITAN 84				·			
GRIF	FITHS, DARLAJEAN M	•		82 Street A	ddress (P.O. Box Number is Not Acceptable	)		
	U.L. TUTTI LAINE	•			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	211 / 212 1514 401 201 201 201 201 201 201 201 201 201 2	216. 9.511 1241	
CAPI	E CORAL FL 33904			83	· 10 10 10 10 10 10 10 10 10 10 10 10 10			
	•			84 City	2. 14 TOLER TAKES AF THE STREET STREET	85 Zip	Code	].
						<u> FL                                    </u>		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the a	ove-named o	corporation submits this statement for the pur ration's board of directors. I hereby accept the	rpose of changing it se appointment as i	ts registered reaistered	
office or re	egistered agent, or both, in the State of	r Florida: Such change was autons of, Section 607,0505, Flori	nonzec da Stati	tes.	Tation's board of directors. Fileropy descept a	черения по	-3	
1.175	The said of the said						<u> </u>	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered	Agent signature re	runeu witch remarkony)	DATE		2 ا
								1 2
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			, S
12.	OFFICERS AND		13.	LE	ADDITIONS/CHANGES TO OFFIC	☐ Change		24 4 700
		DIRECTORS						001 6 675 6 00
TITLE NAME	DPS	DIRECTORS	1.1 TF 1.2 N/			☐ Change		00.047.44
TITLE  NAME  STREET ADDRESS	DPS Griffiths, Darlajean M 105 S.E. 46Th Lane	DIRECTORS	1.1 TF 1.2 N/ 1.3 ST	ME		☐ Change	e	DOLO94//44/09
TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP	DPS Griffiths, Darlajean M	DIRECTORS	1.1 TF 1.2 N/ 1.3 ST	ME REET ADDRESS TY-ST-ZIP		☐ Change	e	00147/100000
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	DPS Griffiths, Darlajean M 105 S.E. 46Th Lane	DIRECTORS  DELETE	1.1 TF 1.2 N/ 1.3 ST 1.4 CI	ME REET ADDRESS IY-ST-ZIP LE		☐ Change	e	00144774000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DPS Griffiths, Darlajean M 105 S.E. 46Th Lane	DIRECTORS  DELETE	1.1 TF 1.2 N/ 1.3 ST 1.4 CI 2.1 TI 2.2 N/	ME REET ADDRESS IY-ST-ZIP LE		☐ Change	e	001001000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DPS Griffiths, Darlajean M 105 S.E. 46Th Lane	DIRECTORS  DELETE	1.1 TF 1.2 N/ 1.3 ST 1.4 CI 2.1 TF 2.2 N/ 2.3 ST	ME REET ADDRESS IY-ST-ZIP LE ME		☐ Change	Addition	00.447.40000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS Griffiths, Darlajean M 105 S.E. 46Th Lane	DIRECTORS  DELETE	1.1 TF 1.2 N/ 1.3 ST 1.4 CI 2.1 TF 2.2 N/ 2.3 ST	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP		☐ Change	Addition	001447/400000
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	DPS Griffiths, Darlajean M 105 S.E. 46Th Lane	DELETE DELETE	1.1 TT 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C	ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE		☐ Change	Addition	00177770000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 NV 1.3 ST 1.4 CI 2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TI 3.2 NV	ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE		☐ Change	Addition  Addition	001477770000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	DPS GRIFFITHS, DARLAJEAN M 105 S.E46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 N/ 1.3 SF 1.4 CF 2.1 TF 2.2 N/ 2.3 SF 2.4 CF 3.1 TF 3.2 N/ 3.3 SF	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME		Change	Addition  Addition	0017777700000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CONTY-ST-ZIP	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 N/ 1.3 SF 1.4 CF 2.1 TF 2.2 N/ 2.3 SF 2.4 CF 3.1 TF 3.2 N/ 3.3 SF	ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP REET ADDRESS		☐ Change	Addition  Addition	001/47/1/40000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 NV 1.3 ST 1.4 CI 2.1 TT 2.2 NV 2.3 ST 2.4 C 3.1 TI 3.2 NV 3.3 ST 3.4 C	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE IME REET ADDRESS TY-ST-ZIP LE IME REET ADDRESS TY-ST-ZIP LE		Change	Addition  Addition	DOLO PASS A POST OF O
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME	DPS GRIFFITHS, DARLAJEAN M 105 S.E 46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 N/ 1.3 ST 1.4 CI 2.1 TT 2.2 N/ 2.3 ST 2.4 C 3.1 TI 3.2 N/ 3.3 ST 3.4. C 4.1 TI 4.2 N/	ME REET ADDRESS TY-ST-ZIP LE AME AME		Change	Addition  Addition	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP	DPS GRIFFITHS, DARLAJEAN M 105 S.E 46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 NV 1.3 ST 1.4 CI 2.1 TT 2.2 NV 2.3 S 2.4 C 3.1 TI 3.2 NV 3.3 S 3.4 C 4.1 TT 4.2 NV 4.3 S	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS REET ADDRESS		Change	Addition  Addition  Addition  Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	DPS GRIFFITHS, DARLAJEAN M 105 S.E 46TH LANE CAPE CORAL FL	DELETE  DELETE  DELETE	1.1 TF 1.2 NV 1.3 SI 1.4 CI 2.1 TI 2.2 NV 2.3 ST 2.4 CO 3.1 TI 3.2 NV 3.3 ST 3.4 CO 4.1 TI 4.2 NV 4.3 SI 4.4 CO	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE AME REET ADDRESS TY-ST-ZIP REET ADDRESS TY-ST-ZIP		Change	Addition  Addition  Addition	0.1477, 400 1000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE TITLE	DPS GRIFFITHS, DARLAJEAN M 105 S.E 46TH LANE CAPE CORAL FL	DELETE DELETE	1.1 TF 1.2 NV 1.3 ST 1.4 CI 2.1 TT 2.2 NV 2.3 S 2.4 C 3.1 TI 3.2 NV 3.3 S 3.4 C 4.1 TT 4.2 NV 4.3 S	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP ILE AME REET ADDRESS IY-ST-ZIP ILE REET ADDRESS IY-ST-ZIP ILE REET ADDRESS IY-ST-ZIP ILE		Change	Addition  Addition  Addition	00.447,400000
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE  DELETE  DELETE	1.1 TT 12 NV 1.3 SI 1.4 CI 1.3 SI 1.4 CI 2.1 TI 2.2 NV 2.3 S' 2.4 CC 3.1 TI 3.2 NV 3.3 S' 3.4 CC 4.1 TI 4.2 NV 4.3 SI 4.4 CC 5.1 TI 5.2 NV 5.2	ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP REE AME REET ADDRESS TY-ST-ZIP RE		Change	Addition  Addition  Addition	BOLEN, ROOLOGO
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE TITLE	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE  DELETE  DELETE	1.1 TT 12 NV 1.3 SI 1.4 CI 2.1 TT 2.2 NV 2.3 S' 2.4 CC 3.1 TT 3.2 NV 3.3 S' 3.4 CC 4.1 TT 4.2 NV 4.3 S' 4.4 CC 5.1 T 5.2 NV 5.3 S' 3.5	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS IY-ST-ZIP ILE MME		Change	Addition  Addition  Addition	00141/100000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE  DELETE  DELETE	1.1 TT 12 NV 1.3 SI 1.4 CI 2.1 TT 2.2 NV 2.3 S' 2.4 CC 3.1 TT 3.2 NV 3.3 S' 3.4 CC 4.1 TT 4.2 NV 4.3 S' 4.4 CC 5.1 T 5.2 NV 5.3 S' 5.4 CC 5.5 CV 5.5	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP REET ADDRESS IY-ST-ZIP ILE MME REET ADDRESS		Change  Change	Addition  Addition  Addition  Addition  Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE  DELETE  DELETE	1.1 TT 12 NV 1.3 SI 1.4 CI 2.1 TT 2.2 N. 2.3 S' 2.4 CC 3.1 TI 3.2 N. 3.3 S' 3.4 . CC 4.1 TT 4.2 N 4.3 S' 4.4 CC 5.1 T 5.2 N 5.3 S' 5.4 CC 6.1 T	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP ILE AME REET ADDRESS IY-ST-ZIP ILE LE INGE REET ADDRESS IY-ST-ZIP ILE INGE INGE INGE INGE INGE INGE INGE ING		Change	Addition  Addition  Addition  Addition  Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS GRIFFITHS, DARLAJEAN M 105 S.E. 46TH LANE CAPE CORAL FL	DELETE  DELETE  DELETE	1.1 TT 12 NV 1.3 SI 1.4 CI 2.1 TI 2.2 N. 2.3 S' 2.4 CC 3.1 TI 3.2 N. 3.3 S' 3.4 . C. 4.1 TI 4.2 N. 4.3 S' 4.4 CC 5.1 T. 5.2 N. 5.3 S 5.4 CC 6.1 T. 6.2 N	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP ILE AME REET ADDRESS IY-ST-ZIP ILE LE INGE REET ADDRESS IY-ST-ZIP ILE INGE INGE INGE INGE INGE INGE INGE ING		Change  Change	Addition  Addition  Addition  Addition  Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: