2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 11, 2004
Secretary of State

DOCUMENT# P00000040831

Entity Name: INNER REFLECTION THERAPY CENTER, PA

Current Principal Place of Business:

1900 SW 24 STREET, SUITE 400
MIAMI, FL 33145

New Principal Place of Business:

8352 SW 8 STREET
MIAMI, FL 33144 US

Current Mailing Address:

1900 SW 24 STREET, SUITE 400
MIAMI, FL 33145

New Mailing Address:

8882 NW 177 TERRACE
MIAMI, FL 33018 US

FEI Number: 65-1002567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

IZQUIERDO, AIDO M
8882 NW 177 TERRACE
HIALEAH, FL 33018

Name and Address of New Registered Agent:

IZQUIERDO, AIDO M
8882 NW 177 TERRACE
MIAMI, FL 33018 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: 06/11/2004
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: IZQUIERDO, AIDA M
Address: 8882 NW 177 TERR.
City-St-Zip: HIALEAH, FL 33018

Title: TD ( ) Delete
Name: CARMONA, MARTHA C
Address: 12011 SW 124 TERR.
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: IZQUIERDO, AIDA M
Address: 8882 NW 177 TERR.
City-St-Zip: MIAMI, FL 33018 US

Title: SD (X) Change ( ) Addition
Name: JARAMILLO, MARY E
Address: 1717 N BAYSHORE DRIVE, # 3832
City-St-Zip: MIAMI, FL 33132 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AIDA M IZQUIERDO P 06/11/2004
Electronic Signature of Signing Officer or Director — Date