

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078415

FILED
Apr 29, 2005
Secretary of State

Entity Name: MIND AND BODY THERAPEUTIC SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

200 NORTHEAST 212 STREET
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

4222 JOHNSON STREET
HOLLYWOOD, FL 33021

Current Mailing Address:

200 NORTHEAST 212 STREET
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

4222 JOHNSON STREET
HOLLYWOOD, FL 33021

FEI Number: 65-1044714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, MANUEL
200 NORTHEAST 212 STREET
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

TORRES, MANUEL
4222 JOHNSON STREET
HOLLYWOOD, FL 33021 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:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TORRES, MANUEL
Address: 200 NORTHEAST 212 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VP () Delete
Name: TORRES, ANDREA
Address: 200 NE 212 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TORRES, MANUEL
Address: 4222 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP (X) Change () Addition
Name: TORRES, ANDREA
Address: 4222 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: ANDREA CATANIA TORRES

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date