2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042517

Entity Name: VLAAR INTERNATIONAL PHYSICAL THERAPY, INC.

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3469 W. BOYNTON BEACH BLVD 2240 W. WOOLBRIGHT RD.

SUITE 346 SUITE 11

BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33426

Current Mailing Address: New Mailing Address:

2240 W. WOOLBRIGHT RD. 3469 W. BOYNTON BEACH BLVD

SUITE 11 SUITE 346

BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33426

FEI Number: 65-1098778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VLAAR, JOHANNES VLAAR, JOHANNES

3469 W. BOYNTON BEACH BLVD. 2240 W. WOOLBRIGHT RD. SUITE 11

SUITE 346 BOYNTON BEACH, FL 33436 US BOYNTON BEACH, FL 33426 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: JOHANNES M. VLAAR 04/08/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

PSTD

Title:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VLAAR, JOHANNES Name: Name: VLAAR, JOHANNES

3469 W. BOYNTON BEACH BLVD., SUITE 11 2240 W. WOOLBRIGHT RD. SUITE 346 Address: Address:

City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33426

Title: Title: (X) Change () Addition () Delete

VLAAR, CAROLIEN D Name: Name: VLAAR, CAROLIEN D

3469 W. BOYNTON BEACH BLVD., SUITE 11 2240 W. WOOLBRIGHT RD. SUITE 346 Address: Address:

BOYNTON BEACH, FL 33426 BOYNTON BEACH, FL 33436 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHANNES M. VLAAR, P.T. **PSTD** 04/08/2009

Electronic Signature of Signing Officer or Director

Date