

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000062370

Entity Name: FAST THERAPY CENTER, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2127 WEST FLAGLER ST.
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

2127 WEST FLAGLER ST.
MIAMI, FL 33125

New Mailing Address:

FEI Number: 65-1116698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FUENTES, YSRAEL A
2127 WEST FLAGLER ST.
MIAMI, FL 33125 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

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: FUENTES, YSREAL A
Address: 2127 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33125

Title: D (X) Delete
Name: BLANCH, IRAIDA R
Address: 12250 SOUTHWEST 39 STREET
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: YSRAEL FUENTES

PSD

04/28/2008

Electronic Signature of Signing Officer or Director

Date