

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081543

Entity Name: THERAPY TOO, INC.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

279 ROYAL POINCIANA WAY
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

322 VALENCIA RD.
W. PALM BCH, FL 33401

New Mailing Address:

651 OKEECHOBEE BLVD
#409
W. PALM BCH, FL 33401

FEI Number: 56-2284909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARKS, DONNA
322 VALENCIA RD.
W. PALM BCH, FL 33401 US

Name and Address of New Registered Agent:

MARKS, DONNA
651 OKEECHOBEE BLVD.
#409
W. PALM BCH, FL 33401 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: DONNA MARKS

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARKS, DONNA
Address: 322 VALENCIA RD.
City-St-Zip: W. PALM BCH, FL 33401

Title: S () Delete
Name: MAJOUF, PHILLIPE
Address: 109 CLOISTER RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T () Delete
Name: MALOUF, MARTA
Address: 109 CLOISTER RD
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DONNA MARKS

PRES

02/04/2009

Electronic Signature of Signing Officer or Director

Date