

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081543

Entity Name: THERAPY TOO, INC.

FILED
Jun 22, 2010
Secretary of State

Current Principal Place of Business:

279 ROYAL POINCIANA WAY
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 56-2284909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

SPRINKLES PALM BEACH
279 ROYAL POINCIANA WAY
PALM BEACH, FL 33480 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

06/22/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: DONNA MARKS
Address: 651 OKEECHOBEE BLVD #409
City-St-Zip: W. PALM BCH, FL 33401

Title: S
Name: MAJOUF, PHILLIPE D DONNA M
Address: 109 CLOISTER RD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T
Name: MALOUF, MARTA D DONNA M
Address: 109 CLOISTER RD
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: DONNA MARKS

PRES

06/22/2010

Electronic Signature of Signing Officer or Director

Date