

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081596

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: THERAPEUTIC INTERVENTIONS, INC.

## Current Principal Place of Business:

1393 SW 1ST STREET #300  
MIAMI, FL 33135

## New Principal Place of Business:

1441 SW 1ST STREET  
MIAMI, FL 33135

## Current Mailing Address:

1393 SW 1ST STREET #300  
MIAMI, FL 33135

## New Mailing Address:

1441 SW 1ST STREET  
MIAMI, FL 33135

FEI Number: 56-2286206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AURIGNAC, MICHELE  
1393 SW 1ST STREET #300  
MIAMI, FL 33135 US

## Name and Address of New Registered Agent:

AURIGNAC, MICHELE  
1441 SW 1ST STREET  
MIAMI, FL 33135 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: MICHELE AURIGNAC

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: AURIGNAC, MICHELE  
Address: 1393 SW 1ST STREET SUITE 300  
City-St-Zip: MIAMI, FL 33135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: AURIGNAC, MICHELE  
Address: 1441 SW 1ST STREET  
City-St-Zip: MIAMI, FL 33135

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: MICHELE AURIGNAC

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date