2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006
Secretary of State

DOCUMENT# P03000033816

Entity Name: AT HOME MASSAGE THERAPY, INC.

Current Principal Place of Business:

11211 S. MILITARY TRAIL 5214
BOYNTON BEACH, FL 33436

New Principal Place of Business:

11211 S. MILITARY TRAIL
5214
BOYNTON BEACH, FL 33436

Current Mailing Address:

11211 S. MILITARY TRAIL 5214
BOYNTON BEACH, FL 33436

New Mailing Address:

11211 S. MILITARY TRAIL
5214
BOYNTON BEACH, FL 33436

FEI Number: 01-0776383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHIRK, MARY
11211 S. MILITARY TRAIL 5214
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

SHIRK, MARY
11211 S. MILITARY TRAIL
5214
BOYNTON BEACH, FL 33436 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: MARY SHIRK 04/11/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHIRK, MARY
Address: 11211 S. MILITARY TRAIL #5214
City-St-Zip: BOYNTON BEACH, FL 33436

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SHIRK, MARY E
Address: 11211 S. MILITARY TRAIL #5214
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP ( ) Change (X) Addition
Name: SHIRK, RON S
Address: 11211 S. MILITARY TRAIL #5214
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY E. SHIRK P 04/11/2006
Electronic Signature of Signing Officer or Director Date