

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105739

Entity Name: AEGEAN THERAPY, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

6018 SW 18TH ST.
C-1
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

6018 SW 18TH ST
C-1
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 86-1083514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIVLER, KIMBERLY S
16056 BRISTOL ISLE WAY
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

BREW, KATE P
2401 BANYAN RD
BOCA RATON, FL 33432 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: KATE BREW

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BREW, KATE
Address: 2401 BANYAN RD.
City-St-Zip: BOCA RATON, FL 33432 US

Title: VP () Delete
Name: SHIVLER, KIMBERLY S
Address: 16056 BRISTOL ISLE WAY
City-St-Zip: DELRAY BEACH, FL 33446 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: PARKER, VALERIE A
Address: 831 SPRINGS CIRCLE APT 106
City-St-Zip: DEERFIELD BEACH, FL 33441 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATE BREW

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date