

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000116192

Entity Name: SPIRIPHYSICAL INC

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

144 NE 45 STREET  
MIAMI, FL 33137 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 370761  
MIAMI, FL 33137 US

**New Mailing Address:**

144 NE 45 STREET  
MIAMI, FL 33137 US

FEI Number: 73-1683962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BALTZ, BRUCE  
144 NE 45 STREET  
MIAMI, FL 33137 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: BALTZ, BRUCE K  
Address: 144 NE 45 ST.  
City-St-Zip: MIAMI, FL 33137

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: BRUCE BALTZ

PVST

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date