2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2011
Secretary of State

DOCUMENT# P03000129294

Entity Name: AWARE CARE THERAPIES, INC.

Current Principal Place of Business:

2102 NEWPORT U
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

2102 NEWPORT U
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 20-0352375 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLLAR-LEVY, BARBARA
2102 NEWPORT U
DEERFIELD BEACH, FL 33442 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: P
Name: HOLLAR-LEVY, BARBARA
Address: 2102 NEWPORT U
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VP
Name: VIGNOLO, ADRIANA
Address: 1370 NORTH WEST 127 DRIVE
City-St-Zip: SUNRISE, FL 33323 US

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: BARBARA HOLLAR-LEVY PRES 01/20/2011

Electronic Signature of Signing Officer or Director — Date