2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2012
Secretary of State

DOCUMENT# P03000152208

Entity Name: THERAPY ON DEMAND INC.

Current Principal Place of Business:

8135 EMERALD WINDS CIR
BOYNTON BEACH, FL 33473

New Principal Place of Business:

Current Mailing Address:

8135 EMERALD WINDS CIR
BOYNTON BEACH, FL 33473

New Mailing Address:

FEI Number: 20-0563292 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLEINMAN, IAN L ESQ
TOLGYESI,KATZ,HANKIN & KATZ, P.A.
1909 TYLER STREET
HOLLYWOOD, FL 33020 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: D
Name: GALIN, BENJAMIN M
Address: 8135 EMERALD WINDS CIR
City-St-Zip: BOYNTON BEACH, FL 33473

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: BENJAMIN GALIN PRES 04/17/2012

Electronic Signature of Signing Officer or Director — Date