2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000158185

Address:

City-St-Zip:

63 REYNOLDS DRIVE

FAIRFIELD, CT 06824 US

Entity Name: PLATYPUS THERAPY, INC.

FILED Apr 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 253 SW 19TH ROAD MIAMI, FL 33129 **Current Mailing Address: New Mailing Address:** 253 SW 19TH ROAD MIAMI, FL 33129 FEI Number: 51-0493982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MAYO, JORGE 150 SE 2ND AVE., STE 1025 MAYO, JORGE 307 NE 1 STREET US MIAMI, FL 33131 MIAMI, FL 33132 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: JORGE MAYO 04/03/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PAEZ, ARSENIO JR. Name: Name: 63 REYNOLDS DRIVE Address: Address: City-St-Zip: FAIRFIELD, CT 06824 US City-St-Zip: () Delete Title: Title: () Change () Addition PAEZ, ARSENIO JR. Name: Name: 63 REYNOLDS DRIVE Address: Address: FAIRFIELD, CT 06824 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition PAEZ, ARSENIO JR. Name: Name: 63 REYNOLDS DRIVE Address: Address: City-St-Zip: FAIRFIELD, CT 06824 US City-St-Zip: Title: () Delete Title: () Change () Addition PAEZ, ARSENIO JR. Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ARSENIO PAEZ, JR. 04/03/2007 D