

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029680

Entity Name: KIDPRO THERAPIES, INC.

FILED
Apr 29, 2007
Secretary of State

Current Principal Place of Business:

8651 SW CRUDEN BAY COURT
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

8651 SW CRUDEN BAY COURT
STUART, FL 34997 US

New Mailing Address:

FEI Number: 51-0497902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEACON ACCOUNTING SERVICE, INC.
3135 SW MAPP RD
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

PRISCILLA THOMASEVICH, CPA, INC.
11201 LAUREL WALK RD
WELLINGTON, FL 33467 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: PRISCILLA THOMASEVICH

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILD, JENNIFER
Address: 8651 SW CRUDEN BAY CT
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: JENNIFER WILD

P

04/29/2007

Electronic Signature of Signing Officer or Director

Date