2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084285

Entity Name: THERARY ASSOCIATES OF SOLITH FLORIDA INC

FILED Jan 29, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
6595 NW 36TH ST #305-2 MIAMI, FL 33166				
Current Mailing Address:		New Mailing Address:		
6595 NW 36TH ST #305-2 MIAMI, FL 33166				
FEI Number: 65-1226643 F	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
LORENTE, JEZABEL L ESQ TEW CARDENAS LLP, 4 SE 1441 BRICKELL AVENUE MIAMI, FL 33131 US				
The above named entity subi	mits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATURE:				
		ent	 Date	

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: MONTAGNER, JENNY MONTAGNER, JENNY Name: Name: 1100 SOUTHWEST 100 COURT 6595 NW 36TH ST #305-2 Address: Address: City-St-Zip: MIAMI, FL 33174 City-St-Zip: MIAMI, FL 33166

Title: () Delete Title: (X) Change () Addition TROFIBIO, KATHERINE TROFIBIO, KATHERINE Name: Name: Address: 16518 NE 26 AVENUE #403 Address: 6595 NW 36TH ST #305-2 NORTH MIAMI BEACH, FL 33160 MIAMI, FL 33166 City-St-Zip: City-St-Zip:

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.

SIGNATURE: JENNY MONTAGNER Ρ 01/29/2007