

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084285

Entity Name: THERAPY ASSOCIATES OF SOUTH FLORIDA, INC.

FILED
Mar 24, 2012
Secretary of State

Current Principal Place of Business:

9999 NE 2ND AVE, STE 301
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

9999 NE 2ND AVE, STE 301
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 65-1226643 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UTRERA, NATALIA V
SPIEGEL & UTRERA PA, 1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PV
Name: TROFIBIO, KATHERINE A
Address: 9999 NE 2ND AVENUE STE# 301
City-St-Zip: MIAMI SHORES, FL 33138

Title: ST
Name: TROFIBIO, ANA E
Address: 9999 NE 2ND AVENUE STE #301
City-St-Zip: MIAMI SHORES, FL 33138

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: ANA ELSA TROFIBIO

ST

03/24/2012

Electronic Signature of Signing Officer or Director

Date