

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000123919

Entity Name: THERA-CON, INC.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7811 CORAL WAY  
107  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

7811 CORAL WAY  
107  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 20-1559438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODRIGUEZ, GABRIELA  
5572 NW 114 AVE  
101  
MIAMI, FL 33178 US

**Name and Address of New Registered Agent:**

RODRIGUEZ, GABRIELA  
6726 SW 152 PLACE  
MIAMI, FL 33193 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: GABRIELA RODRIGUEZ

04/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RODRIGUEZ, GABRIELA  
Address: 6726 SW 152 PLACE  
City-St-Zip: MIAMI, FL 33193

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: GABRIELA RODRIGUEZ

PD

04/28/2012

Electronic Signature of Signing Officer or Director

Date