2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# P05000023112

Entity Name: PRECISION THERAPY CENTERS, INC.

Current Principal Place of Business:

9350 NW 33RD ST
202
CORAL SPRINGS, FL 33065

New Principal Place of Business:

9350 NW 33RD ST
201
CORAL SPRINGS, FL 33065

Current Mailing Address:

23150 FASHION DRIVE
T-240
ESTERO, FL 33928

New Mailing Address:

7461 WEST 29 WAY
#101
HIALEAH, FL 33018

FEI Number: 20-2357254 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRISHKOFF, MARGARITA M
23150 FASHION DRIVE
SUITE T-240
ESTERO, FL 33928 US

Name and Address of New Registered Agent:

SANABRIA, NORGE G
7461 WEST 29 WAY
#101
HIALEAH, FL 33018 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: NORGE GAMON SANABRIA 02/23/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DULUC, LUIS
Address: 23150 FASHION DRIVE, T-240
City-St-Zip: ESTERO, FL 33928

Title: D (X) Delete
Name: GRISHKOFF, MARGARITA M
Address: 23150 FASHION DRIVE T-240
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: SANABRIA, NORGE G
Address: 7461 WEST 29 WAY #101
City-St-Zip: HIALEAH, FL 33018

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: NORGE GAMON SANABRIA P 02/23/2009
Electronic Signature of Signing Officer or Director Date