## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000096794

Entity Name: NATIONAL THERAPEUTIC SERVICES, INC.

FILED Jul 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

14867 SW 175 ST 10900 S.W. 84TH COURT MIAMI, FL 33187

MIAMI, FL 33156

**Current Mailing Address: New Mailing Address:** 

14867 SW 175 ST 10900 S.W. 84TH COURT

MIAMI, FL 33156 MIAMI, FL 33187

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

REYES-FOURNIER, PAUL VERA, RAPHAEL P 14867 SW 175 ST 10900 S.W. 84TH COURT MIAMI, FL 33187 MIAMI, FL 33156

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: RAPHAEL P VERA 07/13/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Title: CFO (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete VAIR, RICHARD VAIR, RICHARD Name: Name:

14867 SW 175 ST 10900 S.W. 84TH COURT Address: Address:

City-St-Zip: MIAMI, FL 33187 City-St-Zip: MIAMI, FL 33156

Title: SEC Title: ( ) Delete (X) Change ( ) Addition KING, SHERRY Name: Name: HEALY, GEORGE C

14867 SW 175 ST 10900 S.W. 84TH COURT Address: Address:

MIAMI, FL 33187 MIAMI, FL 33156 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: TRFA () Delete TRFA

REYES-FOURNIER, PAUL Name: VERA, RAPHAEL P Name: 14867 SW 175 ST 10900 S.W. 84TH COURT Address: Address:

City-St-Zip: MIAMI, FL 33187 City-St-Zip: MIAMI, FL 33156

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: RICHARD P VAIR CEO 07/13/2006