

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000003267

Entity Name: THIRD EYE THERAPY, INC.

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

3801 N UNIVERSITY DRIVE
SUITE # 205
SUNRISE, FL 33351

New Principal Place of Business:

6712 CYPRESS WALK TER
TAMARAC, FL 33321

Current Mailing Address:

3801 N UNIVERSITY DRIVE
SUITE # 205
SUNRISE, FL 33351

New Mailing Address:

6712 CYPRESS WALK TER
TAMARAC, FL 33321

FEI Number: 20-4076167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSELLI, MELANIE T
2501 NW 41ST AVE
210
LAUDERHILL, FL 33313 US

Name and Address of New Registered Agent:

ROSELLI, MELANIE T
6712 CYPRESS WALK TER
TAMARAC, FL 33321 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: MELANIE ROSELLI

04/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSELLI, MELANIE T
Address: 2501 NW 41ST AVE # 210
City-St-Zip: LAUDERHILL, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSELLI, MELANIE T
Address: 6712 CYPRESS WALK TER
City-St-Zip: TAMARAC, FL 33321

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: MELANIE ROSELLI

P

04/04/2007

Electronic Signature of Signing Officer or Director

Date