

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000019680

FILED
Apr 29, 2008
Secretary of State

Entity Name: GLORIA I. ZAPATA PEDIATRIC THERAPY. INC.

Current Principal Place of Business:

7261 SYLVAN GLADE CT.
WEEKI WACHEE, FL 346074037

New Principal Place of Business:

246 MARINER BOULEVARD
SPRING HILL, FL 34609

Current Mailing Address:

7261 SYLVAN GLADE CT.
WEEKI WACHEE, FL 346074037

New Mailing Address:

FEI Number: 20-4304450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAPATA, GLORIA I
7261 SYLVAN GLADE CT.
WEEKI WACHEE, FL 346074037 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: ZAPATA, GLORIA I
Address: 7261 SYLVAN GLADE CT.
City-St-Zip: WEEKI WACHEE, FL 346074037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GLORIA ZAPATA

PVST

04/29/2008

Electronic Signature of Signing Officer or Director

Date