2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026203

City-St-Zip: NAPLES, FL 34117

Entity Name: MASSAGE THERAPY BY JENNIFER INC

FILED Feb 29, 2008 Secretary of State

Current F	Principal Place	of Business:	New Principal Place o	New Principal Place of Business:	
	STREET SW FL 34117				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	STREET SW FL 34117				
FEI Number	r: 20-4359164	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
440 31ST	E, JENNIFER STREET SW FL 34117 U	JS			
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Age	nt	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P.D (GILMORE, JEN		Title: (Name: Address:	() Change () Addition	

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: JENNIFER GILMORE PRES 02/29/2008