

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000026993

**FILED**  
**Sep 19, 2008**  
**Secretary of State**

**Entity Name:** SUPER STAR THERAPY, INC.

**Current Principal Place of Business:**

12901 NW 27 AVE.  
MIAMI, FL 33147 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 140151  
CORAL GABLES, FL 331140151

**New Mailing Address:**

**FEI Number:** 76-0818584      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ORTIZ, RICO  
13901 SW 279TH. LN.  
MIAMI, FL 33032 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TORRES, MILEYDIS  
Address: 1850 SW 8TH. ST. SUITE 206  
City-St-Zip: MIAMI, FL 33135 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: VAZQUEZ, BLANCA L  
Address: 12901 NW 27 AVE  
City-St-Zip: MIAMI, FL 33147 US

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: BLANCA VAZQUEZ

PS

09/19/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date