

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077094

FILED
Jan 17, 2012
Secretary of State

Entity Name: MANUAL LYMPH DRAINAGE INSTITUTE, INC.

Current Principal Place of Business:

2510 WELLINGTON GREEN DR.
#305
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

2510 WELLINGTON GREEN DR.
#305
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 20-5096636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIFALCO, LISA
2510 WELLINGTON GREEN DR.
305
WELLINGTON, FL 33414 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: PS
Name: DIFALCO, LISA
Address: 2510 WELLINGTON GREEN DR. #305
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: LISA DIFALCO

PS

01/17/2012

Electronic Signature of Signing Officer or Director

Date