

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000081640

Entity Name: THERAPEUTIC AWAKENINGS, INC.

FILED
Apr 06, 2008
Secretary of State

Current Principal Place of Business:

9130 SW 137TH AVE., APT. 1102
MIAMI, FL 33186

New Principal Place of Business:

14039 SW 121 PLACE
MIAMI, FL 33186

Current Mailing Address:

9130 SW 137TH AVE., APT. 1102
MIAMI, FL 33186

New Mailing Address:

14039 SW 121 PLACE
MIAMI, FL 33186

FEI Number: 20-5093632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVAREZ, EDUARDO
14039 SW 121 PL
MIAMI, FL 33186 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: PSTD () Delete
Name: ALVAREZ, EDUARDO
Address: 9130 SW 137TH AVE., APT. 1102
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ALVAREZ, EDUARDO
Address: 14039 SW 121 PLACE
City-St-Zip: MIAMI, FL 33186

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: EDUARDO ALVAREZ

PSTD

04/06/2008

Electronic Signature of Signing Officer or Director

Date