2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000099253

Entity Name: A BETTER MASSAGE, INC.

FILED Mar 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3108 DEL PRADO BLVD. 4818 CORANADO PKWY

SUITE 3 UNIT #7

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33904 US

Current Mailing Address: New Mailing Address:

4309 SE 5TH AVENUE 309 CAPE CORAL PKWY WEST UNIT B UNIT 203

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33914 US

FEI Number: 20-5289423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DALTON, VALERIE L

DALTON, VALERIE L

4309 SE 5TH AVENUE 309 CAPÉ CORAL PKWY WEST UNIT B UNIT # 203

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33914 US

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: VALERIE DALTON 03/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: DALTON, VALERIE L
Address: 4309 SE 5TH AVENUE UNIT B
Name: DALTON, VALERIE L
Address: 309 CAPE CORAL PKWY WEST UNIT #7

City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: CAPE CORAL, FL 33914 US

Title: DVST () Delete Title: () Change () Addition

 Name:
 DALTON, BRUCE
 Name:

 Address:
 4309 SE 5TH AVENUE UNIT B
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33904 US
 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: VALERIE DALTON OWNE 03/28/2009