

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000129966

Entity Name: GENTLE THERAPY INC.

FILED
Jan 08, 2007
Secretary of State

Current Principal Place of Business:

1790 SW 27TH AVENUE
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

1790 SW 27TH AVENUE
MIAMI, FL 33145

New Mailing Address:

FEI Number: 20-8053615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VELAZQUEZ, VICTOR
8013 OLD CUTLER ROAD
MIAMI, FL 33143 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: PD () Delete
Name: ANDREU, CHRISTEN
Address: 16151 NW 77TH PLACE
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP () Delete
Name: VELAZQUEZ, HORTENSIA
Address: 8013 OLD CUTLER ROAD
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: ANDREU, LIDYA IVETTE
Address: 16151 NW 77TH PLACE
City-St-Zip: MIAMI LAKES, FL 33016

Title: T () Delete
Name: VELAZQUEZ, VICTOR
Address: 8013 OLD CUTLER ROAD
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VICTOR VELAZQUEZ

T

01/08/2007

Electronic Signature of Signing Officer or Director

Date