

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009610

Entity Name: SMP THERAPY, INC.

FILED  
May 11, 2008  
Secretary of State

## Current Principal Place of Business:

3500 NW 121 AVE.  
SUNRISE, FL 33323 US

## New Principal Place of Business:

3500 NW 121 AVE  
SUNRISE, FL 33323 US

## Current Mailing Address:

3500 NW 121 AVE.  
SUNRISE, FL 33323 US

## New Mailing Address:

4743 GRAND CYPRESS CIRCLE NORTH  
COCONUT CREEK, FL 33073 US

FEI Number: 20-8293585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PADILLA, SHIRLEY M  
3500 NW 121 AVE.  
SUNRISE, FL 33323 US

## Name and Address of New Registered Agent:

PADILLA, SHIRLEY M  
4743 GRAND CYPRESS CIRCLE NORTH  
COCONUT CREEK, FL 33073 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:

05/11/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PADILLA, SHIRLEY M  
Address: 3500 NW 121 AVE.  
City-St-Zip: SUNRISE, FL 33323 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PADILLA, SHIRLEY M  
Address: 4743 GRAND CYPRESS CIRCLE NORTH  
City-St-Zip: COCONUT CREEK, FL 33073 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: SHIRLEY PADILLA

P

05/11/2008

Electronic Signature of Signing Officer or Director

Date