2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000052062

Entity Name: VESTA THERAPY SERVICES INC.

FILED Apr 25, 2008 Secretary of State

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

6820 INDIAN CREEK DR SUITE 102 4194 SW 156 AVE MIAMI BEACH, FL 33141

177

MIRAMAR, FL 33027 US

Current Mailing Address: New Mailing Address:

6820 INDIAN CREEK DR SUITE 102 7105 SW 8 STREET MIAMI BEACH, FL 33141

SUITE 306

MIAMI, FL 33144 US

FEI Number: 20-8955961 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:

MOJICA, GIOVANNA MOJICA, GIOVANNA 6820 INDIAN CREEK DR SUITE 102 4194 SW 156 AVE

MIAMI BEACH, FL 33141 # 177 MIRAMAR, FL 33027 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: GIOVANNA MOJICA 04/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MOJICA, GIOVANNNA Name: Name: MOJICA, GIOVANNA 6820 INDIAN CREEK DR SUITE 102 Address: 4194 SW 156 AVE # 177 Address:

City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIRAMAR, FL 33027 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: GIOVANNA MOJICA **PSD** 04/25/2008