

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066761

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: BTN INFUSION INC.

**Current Principal Place of Business:**

7555 37TH AVE N  
ST PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

6442 49TH AVE N  
ST PETERSBURG, FL 33709

**New Mailing Address:**

FEI Number: 26-0312255

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CASNA, ROBERT P SR.  
6442 49TH AVE N  
ST PETERSBURG, FL 33709 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

**OFFICERS AND DIRECTORS:**

Title: P/TR  
Name: CASNA, ROBERT P SR.  
Address: 6442 49TH AVE N  
City-St-Zip: ST PETERSBURG, FL 33709

Title: VP  
Name: CASNA, JUDITH A  
Address: 6442 49TH AVE N.  
City-St-Zip: ST PETERSBURG, FL 33709

I hereby 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 all other like empowered.

SIGNATURE: ROBERT P. CASNA

PRES

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date