

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076266

Entity Name: BE OK THERAPY INC.

FILED
Feb 12, 2009
Secretary of State

Current Principal Place of Business:

6445 SW 164TH AVE
MIAMI, FL 33193

New Principal Place of Business:

Current Mailing Address:

6445 SW 164TH AVE
MIAMI, FL 33193

New Mailing Address:

FEI Number: 51-0641525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANDA-GONZALEZ, BELKIS
6445 SW 164TH AVE
MIAMI, FL 33193 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: LANDA-GONZALEZ, BELKIS
Address: 6445 SW 164TH AVE
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: GONZALEZ, ALVARO R
Address: 6445 SW 164TH AVE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BELKIS LANDA-GONZALEZ

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date