

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000083609

FILED
Mar 28, 2011
Secretary of State

Entity Name: BOCA RATON DECOMPRESSION THERAPY INC

Current Principal Place of Business:

9325 GLADES RD.
SUITE 108
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

9325 GLADES RD.
SUITE 108
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 87-0807103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKS, MICHAEL
9325 GLADES ROAD
STE. 108
BOCA RATON, FL 33434 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: DIR.
Name: MARKS, MICHAEL
Address: 9325 GLADES ROAD STE. 108
City-St-Zip: BOCA RATON, FL 33434 US

Title: DIR.
Name: LESLIE, PACTER
Address: 9325 GLADES ROAD STE. 108
City-St-Zip: BOCA RATON, FL 33433

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: DR. LESLIE PACTER

DIR

03/28/2011

Electronic Signature of Signing Officer or Director

Date