2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2011
Secretary of State

DOCUMENT# P07000086163

Entity Name: AVENUE THERAPY AND WELLNESS INC.

Current Principal Place of Business:

12040 JOG RD
BOYNTON BEACH, FL 33437

New Principal Place of Business:

12040 JOG RD
#8
BOYNTON BEACH, FL 33437

Current Mailing Address:

12040 JOG RD
BOYNTON BEACH, FL 33437

New Mailing Address:

12040 JOG RD
#8
BOYNTON BEACH, FL 33437

FEI Number: 51-0643514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAY, EDWARD P
445 S.E. 17TH TERRACE
DEERFIELD BEACH, FL 33441 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
Name: GRAY, EDWARD P
Address: 445 S.E. 17 TH TERRACE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VP
Name: GRAY, JODI A
Address: 445 S.E. 17TH TERR
City-St-Zip: DEERFIELD, FL 33441

Title: SEC.
Name: GRAY, EDWARD P
Address: 445 S,E, 17TH TERR
City-St-Zip: DEERFIELD, FL 33441

Title: TRES
Name: GRAY, JODI A
Address: 445 S.E. 17TH TERR
City-St-Zip: DEERFIELD, FL 33441

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: EDWARD P GRAY PRES 02/20/2011

Electronic Signature of Signing Officer or Director Date