

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000115002

FILED
Jan 16, 2011
Secretary of State

Entity Name: ALLIED THERAPY PROFESSIONALS, INC.

Current Principal Place of Business:

1720 NE 37 PLACE
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

1720 NE 37 PLACE
HOMESTEAD, FL 33033

New Mailing Address:

FEI Number: 26-1302231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, JOSE A
1720 NE 37 PLACE
HOMESTEAD, FL 33033 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: JOSE GONZALEZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ROJAS, FRANCIA
Address: 1720 NE 37 PLACE
City-St-Zip: HOMESTEAD, FL 33033

Title: D
Name: GONZALEZ, JOSE A
Address: 1720 NE 37 PLACE
City-St-Zip: HOMESTEAD, FL 33033

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: JOSE GONZALEZ

VP

01/16/2011

Electronic Signature of Signing Officer or Director

Date