

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000117303

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** ALL ABOUT THERAPY SERVICES, INC.

**Current Principal Place of Business:**

501 E. SUGARLAND HWY  
CLEWISTON, FL 33440

**New Principal Place of Business:**

**Current Mailing Address:**

1020 W. AVENIDA DEL RIO  
CLEWISTON, FL 33440

**New Mailing Address:**

501 E. SUGARLAND HWY  
CLEWISTON, FL 33440

**FEI Number:** 26-1310181

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUAREZ, GARY NEIL V DT  
1020 W. AVENIDA DEL RIO  
CLEWISTON, FL 33440 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:** DO  
**Name:** WALLS, CARMENCITA B  
**Address:** 12711 WESTPORT CIRCLE  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** DV  
**Name:** MONTESCLAROS, GLORIA A  
**Address:** 1020 W AVENIDA DEL RIO  
**City-St-Zip:** CLEWISTON, FL 33440

**Title:** DT  
**Name:** SUAREZ, GARY NEIL V  
**Address:** 1020 W AVENIDA DEL RIO  
**City-St-Zip:** CLEWISTON, FL 33440

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:** GARY NEIL V. SUAREZ

DT

04/13/2010

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

\_\_\_\_\_  
Date