

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026120

FILED
Apr 20, 2009
Secretary of State

Entity Name: PREFERRED THERAPY CENTER INC

Current Principal Place of Business:

8827 NW 178 LN
MIAMI, FL 33018 US

New Principal Place of Business:

5801 NW 151 ST
102
MIAMI LAKES, FL 33014 US

Current Mailing Address:

8827 NW 178 LN
MIAMI, FL 33018 US

New Mailing Address:

FEI Number: 26-2258806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BITTAR, MARIA B
8827 NW 178 LN
MIAMI, FL 33018 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: P () Delete
Name: BITTAR, MARIA B
Address: 8827 NW 178 LN
City-St-Zip: MIAMI, FL 33018 US

Title: VP () Delete
Name: BLANCO, YAMILA
Address: 1895 W 64 ST
City-St-Zip: HIALEAH, FL 33012 US

Title: ST () Delete
Name: MONTERO, SANDRA M
Address: 1821 SW 162 AVE
City-St-Zip: MIRAMAR, FL 33027 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BLANCO, YAMILA
Address: 15946 NW 81 CT
City-St-Zip: MIAMI LAKES, FL 33016 US

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: MARIA BITTAR

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date