

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000046760

FILED
May 02, 2010
Secretary of State

Entity Name: MAJOR PHYSICAL THERAPY INC.

Current Principal Place of Business:

4895 WINDWARD PASSAGE DRIVE
#3
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

15770 VIANA WINDS POINT
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 26-2585420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HECKER, MARC
15770 VIANA WINDS POINT
DELRAY BEACH, FL 33446 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: HECKER, MARC
Address: 15770 VIANA WINDS POINT
City-St-Zip: DELRAY BEACH, FL 33446

Title: VPS
Name: HECKER, CHERYL
Address: 15770 VIANA WINDS POINT
City-St-Zip: DELRAY BEACH, FL 33446

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: MARC HECKER

PD

05/02/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date