2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# P08000049867

Entity Name: BREAKTHROUGH THERAPY SERVICES, INC.

Current Principal Place of Business:

12545 ORANGE DRIVE
SUITE 502
DAVIE, FL 33330

New Principal Place of Business:

Current Mailing Address:

8147 N SAVANNAH CIRCLE
DAVIE, FL 33328

New Mailing Address:

FEI Number: 26-2660524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOOM, CHARLES
1640 EAST OAK KNOLL CIRCLE
DAVIE, FL 33324 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: PDTS
Name: BLOOM, KIMBERLY
Address: 12545 ORANGE DRIVE,SUITE 502
City-St-Zip: DAVIE, FL 33330

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: KIMBERLY BLOOM PDTS 03/21/2012

Electronic Signature of Signing Officer or Director Date