

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000085203

FILED
May 17, 2009
Secretary of State

Entity Name: HORIZONS THERAPEUTIC MASSAGE, INC.

Current Principal Place of Business:

36310 US HWY 19 N
PALM HARBOR, FL 34684 FL

New Principal Place of Business:

Current Mailing Address:

36310 US HWY 19 N
PALM HARBOR, FL 34684 FL

New Mailing Address:

FEI Number: 20-1338013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHEE, SEON HI
36310 US HWY 19 N
PALM HARBOR, FL 34684 FL

Name and Address of New Registered Agent:

RHEE, SEON HI
36310 US HWY 19 N
PALM HARBOR, FL 34684 US

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: SEON HI RHEE

05/17/2009

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: DPS () Delete
Name: RHEE, SEON HI
Address: 36310 US HWY 19 N
City-St-Zip: PALM HARBOR, FL 34684 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SEONHI RHEE

PRE

05/17/2009

Electronic Signature of Signing Officer or Director

Date