

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000005364

FILED
Mar 31, 2010
Secretary of State

Entity Name: THERAPY ALLIANCE, INC.

Current Principal Place of Business:

5979 NW 151ST STREET, STE 218
MIAMI LAKES, FL 33014 US

New Principal Place of Business:

5979 NW 151ST STREET, STE 200
MIAMI LAKES, FL 33014 US

Current Mailing Address:

5979 NW 151ST STREET, STE 218
MIAMI LAKES, FL 33014 US

New Mailing Address:

5979 NW 151ST STREET, STE 200
MIAMI LAKES, FL 33014 US

FEI Number: 80-0333154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MUDRYJ, EMMANUEL
671 NW 172ND TERRACE
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

MUDRYJ, EMMANUEL
4730 SW 109 TERRACE
DAVIE, FL 33328 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: EMMANUEL MUDRYJ

03/31/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS
Name: MUDRYJ, EMMANUEL
Address: 4730 SW 109 TERRACE
City-St-Zip: DAVIE, FL 33328 US

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: EMMANUEL MUDRYJ

PT

03/31/2010

Electronic Signature of Signing Officer or Director

Date