

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000014714

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** VEGA THERAPY AND CONSULTING SERVICES, INC.

**Current Principal Place of Business:**

14961 SW 82 LANE  
#204  
MIAMI, FL 33193

**New Principal Place of Business:**

9010 SW 137 AVE  
SUITE # 215  
MIAMI, FL 33185

**Current Mailing Address:**

14961 SW 82 LANE  
#204  
MIAMI, FL 33193

**New Mailing Address:**

9010 SW 137 AVE  
SUITE # 215  
MIAMI, FL 33185

**FEI Number:** 26-4307041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VEGA, LISBEY C  
14961 SW 82 LANE  
#204  
MIAMI, FL 33193 US

**Name and Address of New Registered Agent:**

VEGA, LISBEY C  
9010 SW 137 AVE  
SUITE# 215  
MIAMI, FL 33185 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/17/2011

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VEGA, LISBEY C  
Address: 9010 SW 137 AVE # 215  
City-St-Zip: MIAMI, FL 33185

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: LISBEY C VEGA

Electronic Signature of Signing Officer or Director

PRES

02/17/2011

Date