2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2011
Secretary of State

DOCUMENT# P09000030707

Entity Name: FLOWER HANDS MASSAGE THERAPY INC.

Current Principal Place of Business:

17011 NORTH BAY ROAD
APT 208
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

17011 NORTH BAY ROAD
APT 208
SUNNY ISLES, FL 33160

New Mailing Address:

FEI Number: 35-2367550 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEIR, KATERINE
17011 NORTH BAY ROAD
APT 208
SUNNY ISLES, FL 33160 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: P
Name: WEIR, KATERINE
Address: 17011 NORTH BAY ROAD APT 208
City-St-Zip: SUNNY ISLES, FL 33160

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: KATERINE WEIR PRES 03/07/2011

Electronic Signature of Signing Officer or Director — Date