

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000059541

Entity Name: GNC THERAPIES, INC.

FILED
Mar 25, 2011
Secretary of State

Current Principal Place of Business:

5489 WILES ROAD
SUITE 304
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

5489 WILES ROAD
SUITE 304
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 27-0532683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIMA, KRISTIN
5489 WILES RD
SUITE 304
COCONUT CREEK, FL 33073 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: LIMA, OCTAVIO S
Address: 6182 NW 66TH AVE
City-St-Zip: PARKLAND, FL 33067

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: OCTAVIO LIMA

P

03/25/2011

Electronic Signature of Signing Officer or Director

Date