## 2010 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P09000094016

Entity Name: MYTHERAPYJOURNAL.COM INC.

FILED Nov 02, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

555 NE 15TH ST 409 N HIBISCUS DRIVE #31-K

MIAMI, FL 33132 MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

555 NE 15TH ST 409 N HIBISCUS DRIVE #31-K

MIAMI, FL 33132 MIAMI BEACH, FL 33139

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

SACCOMAN, RODOLFO SACCOMAN, RODOLFO 555 NE 15TH ST 409 N HIBISĆUS DRIVE

#31-K MIAMI, FL 33132 US MIAMI BEACH, FL 33139 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: RODOLFO SACCOMAN 11/02/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

DAGASSAN, CHRISTOPHE A Name: 141 SAVONA DRIVE Address: City-St-Zip: JUPITER, FL 33458

Title:

Name: SACCOMAN, ALEXIS

1207 MELVILLE SQUARE - # 417 Address:

RICHMOND, CA 94864 City-St-Zip:

Title:

SACCOMAN, RODOLFO Name: 409 N HIBISCUS DRIVE #6 Address: City-St-Zip: MIAMI BEACH, FL 33139

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: RODOLFO SACCOMAN D 11/02/2010