

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000018846

FILED
Apr 30, 2011
Secretary of State

Entity Name: THE BUTTERFLY AFFECT THERAPY SERVICES INC

Current Principal Place of Business:

741 SW 98TH TERRACE
HOLLYWOOD, FL 33025

New Principal Place of Business:

3500 SW 144TH AVE.
MIRAMAR, FL 33027

Current Mailing Address:

741 SW 98TH TERRACE
HOLLYWOOD, FL 33025

New Mailing Address:

3500 SW 144TH AVE.
MIRAMAR, FL 33027

FEI Number: 27-2021420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEBAUD, GARY
201 WEST SUNRISE BLVD
SUITE 2B
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

PAPILLON, MITZI
3500 SW 144TH AVE.
MIRAMAR, FL 33027 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: MITZI PAPILLON

04/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: PAPILLON, MITZI
Address: 3500 SW 144TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: VP
Name: PAPILLON, MITZI
Address: 3500 SW 144TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: TRES
Name: PAPILLON, MITZI
Address: 3500 SW 144TH AVE.
City-St-Zip: MIRAMAR, FL 33027

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: MITZI PAPILLON

PRES

04/30/2011

Electronic Signature of Signing Officer or Director

Date