

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000024655

FILED
Apr 19, 2012
Secretary of State

Entity Name: LEARN WITH THERAPY, INC.

Current Principal Place of Business:

1380 NORTH, KROME AVENUE
SUITE 110
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

1380 NORTH, KROME AVENUE
SUITE 110
FLORIDA CITY, FL 33034

New Mailing Address:

FEI Number: 45-0923994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAPIA, POLYANNE M
1380 NORTH, KROME AVENUE
SUITE 110
FLORIDA CITY, FL 33034 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: PRES
Name: TAPIA, POLYANNE M
Address: 1380 NORTH, KROME AVENUE, SUITE 110
City-St-Zip: FLORIDA CITY, FL 33034

Title: TREA
Name: TAPIA, POLYANNE M
Address: 1380 NORTH, KROME AVENUE, SUITE 110
City-St-Zip: FLORIDA CITY, FL 33034

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: POLYANNE M. TAPIA

PRES

04/19/2012

Electronic Signature of Signing Officer or Director

Date