2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# P11000054858

Entity Name: THERAPY PROVIDER SERVICE CORP

Current Principal Place of Business:

8254 SW 84 AVE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

8254 SW 84 AVE
MIAMI, FL 33143

New Mailing Address:

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

Name and Address of Current Registered Agent:

GUIMARES ACCOUNTING SERVICES CORP
15461 SW 137 CT
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

TAX MANAGEMENT SERVICES CORP
1470 NW 107 AVENUE SUITE E
MIAMI, FL 33172 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: TAX MANAGEMENT 05/01/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: DEMENA-PASCUAL, ELIZABET
Address: 8254 SW 84 AVE
City-St-Zip: MIAMI, FL 33143

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: DEMENA PASCUAL ELIZABETH PST 05/01/2012
Electronic Signature of Signing Officer or Director Date