

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P93000037248

**FILED**  
**Oct 27, 2009**  
**Secretary of State****Entity Name:** HARD TO TREAT DISEASES INCORPORATED**Current Principal Place of Business:**2655 ULMERTON RD  
#338  
CLEARWATER, FL 33762 US**New Principal Place of Business:****Current Mailing Address:**2655 ULMERTON RD  
#338  
CLEARWATER, FL 33762 US**New Mailing Address:****FEI Number:** 65-0412538      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE,, FL 33470 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:** CEO ( ) Delete  
**Name:** YUAN, TERRY  
**Address:** 2655 ULMERTON RD #338  
**City-St-Zip:** CLEARWATER, FL 33762 US**Title:** CSO ( ) Delete  
**Name:** PEKOVIC, SANJA DR.  
**Address:** 2655 ULMERTON RD #338  
**City-St-Zip:** CLEARWATER, FL 33762 US**Title:** SEC ( ) Delete  
**Name:** ROBERTS, KEITH  
**Address:** 2655 ULMERTON RD #338  
**City-St-Zip:** CLEARWATER, FL 33762**Title:** COO ( ) Delete  
**Name:** CRNOMARKOVIC, IVANA  
**Address:** 2655 ULMERTON RD #338  
**City-St-Zip:** CLEARWATER, FL 33762**Title:** CAO ( ) Delete  
**Name:** ZHAO, CATHY  
**Address:** 2655 ULMERTON RD #338  
**City-St-Zip:** CLEARWATER, FL 33762**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** SEC (X) Change ( ) Addition  
**Name:** ROBICHAUD, CAROL  
**Address:** 2655 ULMERTON RD #338  
**City-St-Zip:** CLEARWATER, FL 33762**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KEITH ROBERTS

SEC

10/27/2009

Electronic Signature of Signing Officer or Director

Date