2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# P95000078012

Entity Name: THERA-PEDS, INC.

Current Principal Place of Business:

11651 NW 32ND MANOR
SUNRISE, FL 33345

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 451186
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 65-0625259 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CARLYLE, LISA
11651 NW 32 MANOR
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

VISENTIN, SHANNON
11651 NW 32 MANOR
SUNRISE, FL 33323 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: SHANNON VISENTIN 04/16/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: CARLYLE, LISA A
Address: 11651 NW 32ND MANOR
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: VISENTIN, SHANNON
Address: 11651 NW 32ND MANOR
City-St-Zip: SUNRISE, FL 33323

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: SHANNON VISENTIN PDST 04/16/2008
Electronic Signature of Signing Officer or Director Date