

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000048067

FILED
Feb 04, 2009
Secretary of State

Entity Name: STEPHEN YOURICH MASSAGE THERAPY, INC.

Current Principal Place of Business:

2446 LETITIA STREET
JENSEN BEACH, FL 34957

New Principal Place of Business:

2446 NE LETITIA STREET
JENSEN BEACH, FL 34957

Current Mailing Address:

2446 LETITIA STREET
JENSEN BEACH, FL 34957

New Mailing Address:

2446 NE LETITIA STREET
JENSEN BEACH, FL 34957

FEI Number: 65-0671115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOURICH, STEPHEN
2446 LETITIA STREET
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

YOURICH, STEPHEN
2446 NE LETITIA STREET
JENSEN BEACH, FL 34957 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: STEPHEN YOURICH

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: YOURICH, STEPHEN
Address: 2446 LETITIA STREET
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: YOURICH, STEPHEN
Address: 2446 NE LETITIA STREET
City-St-Zip: JENSEN BEACH, FL 34957

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: STEPHEN YOURICH

PRES

02/04/2009

Electronic Signature of Signing Officer or Director

Date