

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000050337

FILED
Apr 20, 2004
Secretary of State

Entity Name: ABC PEDIATRIC THERAPY, INC.

Current Principal Place of Business:

9165 PARK DRIVE
9 & 12
MIAMI SHORES, FL 33138 US

New Principal Place of Business:

9165 PARK DRIVE
9
MIAMI SHORES, FL 33138 US

Current Mailing Address:

ABC PEDIATRIC THERAPY, INC.
P.O. BOX 531102
MIAMI SHORES, FL 331531102 US

New Mailing Address:

FEI Number: 65-0761146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, JENNIFER
9165 PARK DRIVE
9 & 12
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

FLEMING, JENNIFER
9165 PARK DRIVE
9
MIAMI SHORES, FL 33138 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:

04/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSO () Delete
Name: FLEMING, JENNIFER
Address: 9165 PARK DRIVE
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: VP () Delete
Name: PALMER, CYNTHIA
Address: 9165 PARK DRIVE
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSO (X) Change () Addition
Name: FLEMING, JENNIFER
Address: 9165 PARK DRIVE , SUITE 9
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: VP (X) Change () Addition
Name: PALMER, CYNTHIA
Address: 9165 PARK DRIVE , SUITE 9
City-St-Zip: MIAMI SHORES, FL 33138

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CYNTHIA PALMER

VP

04/20/2004

Electronic Signature of Signing Officer or Director

Date