

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000042997

FILED
Apr 25, 2012
Secretary of State

Entity Name: ASA PAIN RELIEF THERAPIES, INC.

Current Principal Place of Business:

745 U.S. HIGHWAY 1, STE. 202
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

8736 SE LONGVIEW DR
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 65-0839647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, ALISON S
8736 SE LONGVIEW DR
HOBE SOUND, FL 33455 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: PSD
Name: ADAMS, ALISON S
Address: 8736 SOUTHEAST LONGVIEW DR.
City-St-Zip: HOBE SOUND, FL 33455

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: ALISON SUE ADAMS

PSD

04/25/2012

Electronic Signature of Signing Officer or Director

Date