2012 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 07, 2012
Secretary of State

DOCUMENT# P98000107606

Entity Name: A.M.A. THERAPY, INC.

Current Principal Place of Business:

4422 MORGAN LANE
DAVIE, FL 33328

New Principal Place of Business:

6330 VOLUNTEER ROAD
SW RANCHES, FL 33330

Current Mailing Address:

4422 MORGAN LANE
DAVIE, FL 33328

New Mailing Address:

6330 VOLUNTEER RD
SW RANCHES, FL 33330

FEI Number: 65-0898911 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UDELL, MICHAEL B
5400 S. UNIVERSITY DR.
SUITE 117
DAVIE, FL 33328 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: MICHAEL UDELL
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: GRAZIADEI, RENEE M
Address: 6330 VOLUNTEER RD
City-St-Zip: SW RANCHES, FL 33330

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: RENEE GRAZIADEI P 11/07/2012
Electronic Signature of Signing Officer or Director Date