2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 13, 2006
Secretary of State

DOCUMENT# P99000005610

Entity Name: ABSOLUTE THERAPY, INC.

Current Principal Place of Business:

3501 S UNIVERSITY DRIVE, SUITE 3
DAVIE, FL 33328

New Principal Place of Business:

50 EAST SAMPLE ROAD
SUITE 303
POMPANO BEACH, FL 33064

Current Mailing Address:

P.O. BOX 5208
FT. LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 65-0890327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GREENFIELD, ALAN ESQ.
15105 NW 77 AVENUE, SUITE 303
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

ROTELLA, GARY ESQ.
200 EAST LAS OLAS BLVD.
SUITE 1850
FT. LAUDERDALE, FL 33301 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: GARY ROTELLA 07/13/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GUTHRIE, WILLIAM
Address: 1501 NW 49TH ST #200
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D (X) Delete
Name: ROSENBERG, RALPH
Address: 1501 NW 49TH ST #200
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GUTHRIE, WILLIAM
Address: 50 EAST SAMPLE ROAD, SUITE 303
City-St-Zip: POMPANO BEACH, FL 33064

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM GUTHRIE PRES 07/13/2006
Electronic Signature of Signing Officer or Director Date