

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000011743

Entity Name: N0-SLIP TREATMENT INC.

FILED  
Apr 20, 2011  
Secretary of State

**Current Principal Place of Business:**

5415 LAKE HOWELL ROAD  
#255  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

**Current Mailing Address:**

5415 LAKE HOWELL ROAD  
#255  
WINTER PARK, FL 32792 US

**New Mailing Address:**

FEI Number: 13-4053725      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOFFMAN, EDWARD J  
5471 LAKE HOWELL RD  
#255  
WINTER PARK, FL 32793 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: MR  
Name: PLANT, STEVEN W  
Address: 69 SHALLMAR BLVD  
City-St-Zip: TORONTO, ON M6C 2K2 CA

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: STEVEN PLANT

PRES

04/20/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date