

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065318

FILED  
Apr 25, 2009  
Secretary of State

**Entity Name:** THEUS ACUPUNCTURE MEDICAL CENTER, INC.

**Current Principal Place of Business:**

4845 NORTH DIXIE HIGHWAY  
DEERFIELD BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

4845 NORTH DIXIE HIGHWAY  
POMPAÑO BEACH, FL 33064

**New Mailing Address:**

4845 NORTH DIXIE HIGHWAY  
DEERFIELD BEACH, FL 33064

**FEI Number:** 65-0932484

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THEUS, SAINLOUITANE  
4742 NW 6TH AVENUE  
DEERFIELD BEACH, FL 33064 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

**Election Campaign Financing Trust Fund Contribution (X).**

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: THEUS, SAINLOUITANE  
Address: 4742 NW 6TH AVE  
City-St-Zip: POMPAÑO BEACH, FL 33064

Title: VP ( ) Delete  
Name: THEUS, KESNEL  
Address: 4742 NW 6TH AVE  
City-St-Zip: POMPAÑO BEACH, FL 33064

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: THEUS, KESNEL  
Address: 4742 NW 6TH AVE  
City-St-Zip: DEERFIELD BEACH, FL 33064

I hereby certify that the information supplied with this filing does not qualify 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: KESNEL THEUS

VP

04/25/2009

Electronic Signature of Signing Officer or Director

Date