2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000079974

Entity Name: THERAPEUTIX REHAB & EQUIPMENT SERVICES INC.

FILED May 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11375 N.W. HIGHWAY 326 OCALA, FL 34482

Current Mailing Address: New Mailing Address:

PO BOX 771028 OCALA, FL 344771028

FEI Number: 59-2999866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KNOX, RIC

11375 N.W. HIGHWAY 326

OCALA, FL 34482 US

LANDRUS, ELIZABETH

11375 N.W. HIGHWAY 326

OCALA, FL 34482 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: ELIZABETH LANDRUS 05/30/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

 Name:
 KNOX, RIC
 Name:
 LANDRUS, ELIZABETH

 Address:
 11375 N.W. HIGHWAY 326
 Address:
 P.O. BOX 771028

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:
 OCALA, FL 344771028

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: ELIZABETH LANDRUS PSTD 05/30/2006