2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000095678

Entity Name: THERAPY 'N MOTION, INC.

Current Principal Place of Business:

2715 TIGERTAIL AVENUE # 507

COCONUT GROVE, FL 33133

Current Mailing Address:

2715 TIGERTAIL AVENUE

507

COCONUT GROVE, FL 33133 US

FEI Number: 06-1840395 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRODIE-CRAIG, JACQUELYN 2715 TIGERTAIL AVENUE # 507 COCONUT GROVE, FL 33133 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:

Electronic Signature of Registered Agent

Date

FILED Jan 26, 2015

Secretary of State

CC7653632795

Officer/Director Detail:

Title F

Name BRODIE-CRAIG, JACQUELYN
Address 2715 TIGERTAIL AVENUE
City-State-Zip: COCONUT GROVE FL 33133

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.