

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000049951

Entity Name: DIAMOND MOBIL THERAPY CORP.

Current Principal Place of Business:

11040 NW 59 CT
HIALEAH, FL 33012

Current Mailing Address:

P.O BOX 260714
MIAMI, FL 33126

FEI Number: 36-4701470

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CEJAS, GRECO
11040 NW 59 CT
HIALEAH, FL 33012 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

Officer/Director Detail :

Title	D/P
Name	CEJAS, GRECO
Address	11040 NW 59 CT
City-State-Zip:	HIALEAH FL 33012

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: GRECO CEJAS

D/P

04/27/2013

Electronic Signature of Signing Officer/Director Detail

Date