

1.) CORPORATION NAME: <b>Virginia Massage Therapy, Inc.</b>	DUE DATE: <b>2/29/2016</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CORPORATION SERVICE COMPANY          Bank of America Center, 16th Floor          1111 East Main Street</b>	SCC ID NO: <b>F1413691</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>RICHMOND CITY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>25,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	25,000
CLASS		AUTHORIZED			
COMMON	25,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>FL</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 770 S DIXIE HIGHWAY  
SUITE 200

CITY/ST/ZIP: CORAL GABLES, FL 33146

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: LEONARD I FLUXMAN TITLE: PRES/CEO/COFB ADDRESS: 770 S DIXIE HIGHWAY SUITE 200 CITY/ST/ZIP/CO: CORAL GABLES, FL 33146	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: ROBERT LAZAR TITLE: VP-FINANCE ADDRESS: 770 S DIXIE HIGHWAY SUITE 200 CITY/ST/ZIP/CO: CORAL GABLES, FL 33146	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: ROBERT C. BOEHM TITLE: EVP/SEC ADDRESS: 770 S DIXIE HIGHWAY SUITE 200 CITY/ST/ZIP/CO: CORAL GABLES, FL 33146	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: STEPHEN LAZARUS TITLE: CFO/COO ADDRESS: 770 S DIXIE HIGHWAY SUITE 200 CITY/ST/ZIP/CO: CORAL GABLES, FL 33146	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ LEONARD I FLUXMAN	LEONARD I FLUXMAN, PRES/CEO/COFB	2/11/2016
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.