

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026813

FILED
Aug 09, 2011
Secretary of State

Entity Name: INJURY REHABILITATION SPECIALISTS, LLC

Current Principal Place of Business:

1046 W BUSCH BLVD, STE 200
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

PO BOX 9732
TAMPA, FL 33674

New Mailing Address:

FEI Number: 45-0520578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: VISHER, MICHAEL VP
Address: 5305 WINDBRUSH DR
City-St-Zip: TAMPA, FL 33625 US

Title: MGRM
Name: PINHASOV, VADIM PRES
Address: 20327 CHESTNUT GROOVE DR
City-St-Zip: TAMPA, FL 33647 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MIKE VISHER

MR

08/09/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date