

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000980

FILED
Jan 26, 2010
Secretary of State

Entity Name: NEUROLOGY MOBILE SYSTEM ASSOCIATES INC.

Current Principal Place of Business:

7374 S.W. 93 AVENUE
SUITE 201
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

7374 S.W. 93 AVENUE
SUITE 201
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-1180239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFARO, MICHAEL
7374 SW 93 AVENUE
SUITE 201
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

ALFARO, MICHAEL
7374 SW 93 AVENUE
SUITE 201
MIAMI, FL 33173 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: MICHAEL ALFARO

01/26/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: ALFARO, MARILYN R
Address: 7374 SW 93 AVE, SUITE 201
City-St-Zip: MIAMI, FL 33165

Title: P
Name: ALFARO, MARILYN R
Address: 7374 SW 93 AVE, SUITE 201
City-St-Zip: MIAMI, FL 33165

Title: VP
Name: ALFARO, MICHAEL
Address: 7374 SW 93RD AVE, SUITE 201
City-St-Zip: MIAMI, FL 33173

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: MICHAEL ALFARO

VP

01/26/2010

Electronic Signature of Signing Officer or Director

Date