2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000005373

Entity Name: ONE STOP INJURY CENTERS, INC.

FILED Apr 30, 2012 Secretary of State

US

Current Principal Place of Business: New Principal Place of Business:

707 EAST CERVANTES STREET 6901 NORTH 9TH AVE

SUITE B309 198 A

PENSACOLA, FL 32501 US PENSACOLA, FL 32504 US

Current Mailing Address: New Mailing Address:

707 EAST CERVANTES STREET 6901 NORTH 9TH AVENUE SUITE B309 198 A

PENSACOLA, FL 32501 US PENSACOLA, FL 32504

FEI Number: 26-1759211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FISHER, MONICA
707 EAST CERVANTES STREET
SUITE 309B
PENSACOLA, FL 32501 US
FISHER, MONICA
6901 NORTH 9TH AVENUE
198 A
PENSACOLA, FL 32504 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: MONICA FISHER 04/30/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DIR

Name: FISHER, MONICA J

Address: 6901 NORTH 9TH AVE, STE 198A City-St-Zip: PENSACOLA, FL 32504 US

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: MONICA FISHER DIR 04/30/2012