2013 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000119590

Entity Name: PAIN AND INJURY RECOVERY CENTER, INC.

FILED
Apr 03, 2013
Secretary of State
CC7871408914

Current Principal Place of Business:

324 W. OAK ST KISSIMMEE. FL 34741

Current Mailing Address:

324 W. OAK ST

KISSIMMEE. FL 34741 US

FEI Number: 42-1558339 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JUGO, MICHAEL A 324 W. OAK ST KISSIMMEE, FL 34741 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 JUGO 04/03/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title VP Title F

NameJUGO, MICHAEL ANameMENESES, GRACEAddress324 W. OAK STAddress324 W. OAK ST

City-State-Zip: KISSIMMEE FL 34741 City-State-Zip: KISSIMMEE FL 34741

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.

Electronic Signature of Signing Officer/Director Detail