

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S08941

Entity Name: PAIN CENTER P.A.

Current Principal Place of Business:

8130 ROYAL PALM BLVD
STE 100
CORAL SPRINGS, FL 33065

Current Mailing Address:

8130 ROYAL PALM BLVD
STE 100
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0261575

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROYER, JEFFREY T
1240 PARKSIDE GREEN DR UNIT B
W PALM BEACH, FL 33415 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name GOMEZ, JOHN
Address 8130 ROYAL PALM BLVD., STE 100
City-State-Zip: POMPANO BEACH FL 33065

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: JOHN GOMEZ MD

PRESIDENT

01/17/2017

Electronic Signature of Signing Officer/Director Detail

Date