

2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000001254

Entity Name: PSHS ALPHA PARTNERS, LTD.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

150 S.W. 12TH AVENUE, SUITE 201
POMPAHO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1030 NORTH ORANGE AVENUE
SUITE 105
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 65-0793962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, NOELLE
1030 NORTH ORANGE AVENUE
SUITE 105
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

MEYER, ALBERT R
1030 NORTH ORANGE AVENUE
SUITE 105
ORLANDO, FL 32801 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: S//ALBERT R. MEYER

04/18/2007

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #: P05000044807
Name: PAINCARE SURGERY CENTERS I, INC.
Address: 1030 NORTH ORANGE AVENUE SUITE 105
City-St-Zip: ORLANDO, FL 32801

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: S//RANDY LUBINSKY

04/18/2007

Electronic Signature of Signing General Partner

Date