2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014014

Entity Name: SOUTH FLORIDA MEDICAL PAIN RELIEF CENTER, LLC

FILED Apr 05, 2012 Secretary of State

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

4473 NORTH STATE ROAD 7 6740 TAFT STREET HOLLYWOOD, FL 33024

Current Mailing Address: New Mailing Address:

6740 TAFT ST. 6740 TAFT STREET HOLLYWOOD, FL 33024 HOLLYWOOD, FL 33024

FEI Number: 65-1132665 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:

DUBRAVETZ, JERRY
6365 TAFT STREET
6740 TAFT STREET
SUITE 1004
HOLLYWOOD, FL 33024 US
HOLLYWOOD, FL 33024 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: 04/05/2012

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

 Name:
 DUBRAVETZ, JERRY

 Address:
 6740 TAFT STREET

 City-St-Zip:
 HOLLYWOOD, FL 33024

I hereby 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: JERRY DUBRAVETZ MGRM 04/05/2012