

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077034

Entity Name: LASER PAIN CENTER L.L.C.

FILED
Apr 30, 2010
Secretary of State

Current Principal Place of Business:

7491 NORTH FEDERAL HIGHWAY
SUITE C16
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

7491 NORTH FEDERAL HIGHWAY
SUITE C16
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 11-3729294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDMAN, DEREK
7491 NORTH FEDERAL HWY
SUITE C16
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: FRIEDMAN, DEREK M
Address: 2557 NORTH CORAL TRACE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR
Name: ADAMS, JOELL C
Address: 4033 E. WILDCAT DRIVE
City-St-Zip: CAVE CREEK, AZ 85331

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 Statutes.

SIGNATURE: JOELL C ADAMS

MGR

04/30/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date