

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095363

FILED
Feb 03, 2010
Secretary of State

Entity Name: AMERICARE PAIN MANAGEMENT, LLC

Current Principal Place of Business:

7015 BERACASA WAY
103
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

7015 BERACASA WAY
103
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 20-5671006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENBERG, MICHAEL D
7015 BERACASA WAY
103
BOCA RATON, FL 33433 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: MGRM
Name: ROSENBERG, MICHAEL D
Address: 7015 BERACASA WAY, # 103
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM
Name: GOTTLIEB, BRUCE
Address: 7015 BERACASA WAY, # 103
City-St-Zip: BOCA RATON, FL 33433 US

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: MICHAEL ROSENBERG D.C.

DR.

02/03/2010

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