

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000112946

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: NERVEPAIN SOLUTIONS "L.L.C."

## Current Principal Place of Business:

499 E PALMETTO PARK RD  
SUITE # 204  
BOCA RATON, FL 33432 US

## New Principal Place of Business:

5401 NW 2ND AVE  
SUITE # 229  
BOCA RATON, FL 33487 US

## Current Mailing Address:

499 E PALMETTO PARK RD  
SUITE # 204  
BOCA RATON, FL 33432 US

## New Mailing Address:

5401 NW 2ND AVE  
SUITE # 229  
BOCA RATON, FL 33487 US

FEI Number: 90-0627712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROJAS, CECILIA  
499 E PALMETTO PARK RD  
SUITE # 204  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

ROJAS, CECILIA  
5401 NW 2ND AVE  
SUITE # 229  
BOCA RATON, FL 33487 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:

04/27/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: ROJAS, JUAN C  
Address: 5401 NW 2ND AVE SUITE # 229  
City-St-Zip: BOCA BOCA, FL 33487 US

Title: MGRM  
Name: ROJAS, CARLOS  
Address: 5401 NW 2ND AVE SUITE # 229  
City-St-Zip: BOCA RATON, FL 33487 US

Title: MGRM  
Name: ROJAS, CECILIA  
Address: 5401 NW 2ND AVE SUITE # 229  
City-St-Zip: BOCA RATON, FL 33487 US

Title: MGRM  
Name: GRUPO MARANA DEL NORTE INC  
Address: 5401 NW 2ND AVE SUITE # 229  
City-St-Zip: BOCA RATON, FL 33487 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: JUAN C ROJAS

MGRM

04/27/2012

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