2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 03, 2012
Secretary of State

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Entity Name: THE BROWARD CENTER FOR PAIN AND INJURY, LLC

Current Principal Place of Business:

6555 POWERLINE ROAD
SUITE 103
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

6555 POWERLINE ROAD
SUITE 103
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VIP ACCOUNTING & BUSINESS CONSULTING, LLC
351 SOUTH CYPRESS RD
SUITE 100
POMPANO BEACH, FL 33060 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: HAZIM, JEFFREY W DR.
Address: 6555 POWERLINE ROAD, SUITE 103
City-St-Zip: FORT LAUDERDALE, FL 33309 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 Statues.

SIGNATURE: JEFFREY HAZIM MGR 02/03/2012

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