## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P0000007888

Entity Name: PAIN MANAGEMENT STRATEGIES, INC.

FILED Jan 17, 2005 Secretary of State

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

1125 BEL AIR DRIVE 1 WEST SAMPLE ROAD HIGHLAND BEACH, FL 33487

#104

POMPANO BEACH, FL 33064

**Current Mailing Address: New Mailing Address:** 

1 WEST SAMPLE ROAD 1125 BEL AIR DRIVE HIGHLAND BEACH, FL 33487

#104

POMPANO BEACH, FL 33064

FEI Number: 65-0977950 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:

ROSENBLATT, MELANIE MD ROSENBLATT, MELANIE MD 1125 BEL AIR DRIVE 1 WEST SAMPLE ROAD

HIGHLAND BEACH, FL 33487 US #104 POMPANO BEACH, FL 33064 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: MELANIE ROSENBLATT, MD 01/17/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete Title: Title: (X) Change ( ) Addition ROSENBLATT, MELANIE ROSENBLATT, MELANIE Name: Name: 1125 BEL AIR DRIVE Address: 1 WEST SAMPLE ROAD #104 Address: City-St-Zip: HIGHLAND BEACH, FL 33487 City-St-Zip: POMPANO BEACH, FL 33064

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELANIE ROSENBLATT, MD Ρ 01/17/2005