2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035390

FILED Apr 27, 2012 Secretary of State

Entity Name: NDNC NEUROLOGICAL TREATMENT CENTERS, INC.

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

605 E. ATLANTIC BLVD. 1835 NE MIAMI GARDENS DR. #294 POMPANO BEACH, FL 33060 NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

18671 COLLINS AVE 1835 NE MIAMI GARDENS DR. #294 APT. 3303 NORTH MIAMI BEACH, FL 33179 SUNNY ISLES, FL 33160

FEI Number: 65-1004316 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:

BROWN, STEVEN B PD

18671 COLLINS AVE

APT. 3303

SUNNY ISLES, FL 33160 US

BROWN, STEVEN B PD

1835 NE MIAMI GARDENS DR. #294

NORTH MIAMI BEACH, FL 33179 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: STEVEN B BROWN 04/27/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: BROWN, STEVEN B PD

Address: 1835 NE MIAMI GARDENS DR. #294 City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby 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 all other like empowered.

SIGNATURE: STEVEN B BROWN PD 04/27/2012