

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065064

FILED
Jul 02, 2010
Secretary of State

Entity Name: INJURY INSTITUTE OF FLORIDA, INC.

Current Principal Place of Business:

1454 NE 163RD ST
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

1454 NE 163RD ST
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

P.O. BOX 801440
MIAMI, FL 33280

New Mailing Address:

1454 NE 163RD ST
NORTH MIAMI BEACH, FL 33162

FEI Number: 58-2638585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREW, FRANK M.D.
1380 NE MIAMI GARDENS DRIVE
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

ANDREW, FRANK M.D.
1454 NE 163RD STREET
NORTH MIAMI BEACH, FL 33162 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: _____

Electronic Signature of Registered Agent

07/02/2010

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FRANK, ANDREW
Address: 1454 NE 163RD STREET
City-St-Zip: MIAMI BEACH, FL 33162

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: ANDREW G. FRANK

P

07/02/2010

Electronic Signature of Signing Officer or Director

Date