

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000096403

FILED
Oct 29, 2010
Secretary of State

Entity Name: ADVANCED PAIN MANAGEMENT & REHABILITATION CENTER, INC.

Current Principal Place of Business:

5850 MARLAKE DRIVE
ORLANDO, FL 32809 US

New Principal Place of Business:

11902 CASSIABARK CT
ORLANDO, FL 32837 US

Current Mailing Address:

5850 MARLAKE DRIVE
ORLANDO, FL 32809

New Mailing Address:

11902 CASSIABARK CT
ORLANDO, FL 32837 US

FEI Number: 59-3747325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, EMMANUEL
5850 MARLAKE DRIVE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

ACOSTA, EMMANUEL G
11902 CASSIABARK CT
ORLANDO, FL 32837 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: EMMANUEL G ACOSTA

10/29/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P D
Name: ACOSTA, EMMANUEL G
Address: 11902 CASSIABARK CT
City-St-Zip: ORLANDO, FL 32837 US

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: EMMANUEL G ACOSTA

P

10/29/2010

Electronic Signature of Signing Officer or Director

Date