2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000055080

Sep 11, 2003 Secretary of State

Entity Name: PAIN AND REHABILITATION PHYSICIANS OF PALM BEACH, INC

Current Principal Place of Business:	New Principal Place of Business:
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10111 FOREST HILL BOULEVARD SUITE 221 WEST PALM BEACH, FL 33414

New Mailing Address: Current Mailing Address:

10111 FOREST HILL BOULEVARD PO BOX 211375 SUITE 221 ROYAL PALM BEACH, FL 33421

WEST PALM BEACH, FL 33414

FEI Number: 42-1538976 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:

HUANG, CHARLES S DO HUANG, CHARLES S DO 10111 FOREST HILL BOULEVARD PO BOX 211375 SUITE 221 ROYAL PALM BEACH, FL 33421 WEST PALM BEACH, FL 33414

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: 09/11/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change (X) Addition () Delete Title: HUANG, CHARLES S PRESIDE Name: Name:

Address: PO BOX 211375 Address:

City-St-Zip: City-St-Zip: ROYAL PALM BEACH, FL 33421 US

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 Statutes. 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: CHARLES S HUANG **PRES** 09/11/2003