

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000081015

FILED
Mar 29, 2006
Secretary of State**Entity Name:** TENS RX, INC.**Current Principal Place of Business:**11399 GRAND PINE DRIVE
MONTGOMERY, TX 77356**New Principal Place of Business:****Current Mailing Address:**11399 GRAND PINE DRIVE
MONTGOMERY, TX 77356**New Mailing Address:****FEI Number:** 05-0524556**FEI Number Applied For** ()**FEI Number Not Applicable** ()**Certificate of Status Desired** (X)**Name and Address of Current Registered Agent:**BRICKEN, JOHN C
800 W. PLATT STREET STE #4
TAMPA, FL 33606 US**Name and Address of New Registered Agent:**

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

Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: BRICKEN, DAVID
Address: 11399 GRAND PINE DRIVE
City-St-Zip: MONTGOMERY, TX 77356**Title:** D (X) Delete
Name: HATZIMBES, JIM
Address: 4310 COLONIAL PARK DRIVE
City-St-Zip: BRENTWOOD, PA 15227**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID BRICKEN

D

03/29/2006

Electronic Signature of Signing Officer or Director_____
Date