

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089941

**FILED**  
**Jan 23, 2008**  
**Secretary of State**

**Entity Name:** FLORIDA SPINE SPORTS & REHABILITATION, INC.

**Current Principal Place of Business:**

810 NORTH ROSE AVE  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

7350 SANDLAKE COMMONS BLVD  
2212  
ORLANDO, FL 32819

**Current Mailing Address:**

810 NORTH ROSE AVE  
KISSIMMEE, FL 34741

**New Mailing Address:**

8815 CONROY-WINDERMERE RD  
#203  
ORLANDO, FL 32835

**FEI Number:** 33-1018616

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PLACER, CARLOS J  
810 NORTH ROSE AVE  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

PLACER, CARLOS J  
7350 SANDLAKE COMMONS BLVD.  
2212  
ORLANDO, FL 32819 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:** CARLOS PLACER

01/23/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PTD ( ) Delete  
**Name:** PLACER, CARLOS J  
**Address:** 810 ROSE AVENUE  
**City-St-Zip:** KISSIMMEE, FL 34741

**Title:** VS ( ) Delete  
**Name:** DIAZ, YASMIN  
**Address:** 810 ROSE AVENUE  
**City-St-Zip:** KISSIMMEE, FL 34741

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PTD (X) Change ( ) Addition  
**Name:** PLACER, CARLOS J  
**Address:** 7350 SANDLAKE COMMONS BLVD. SUITE 2212  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** VS (X) Change ( ) Addition  
**Name:** DIAZ, YASMIN  
**Address:** 7350 SANDLAKE COMMONS BLVD SUITE 2212  
**City-St-Zip:** ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify 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:** CARLOS PLACER

PTD

01/23/2008

Electronic Signature of Signing Officer or Director

Date