2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018962

FILED Jan 14, 2004 Secretary of State

Entity Name: THE HEADACHE NETWORK OF BROWARD COUNTY, INC.

Current Principal Place of Business: 4101 N.W. 4TH STREET 208 PLANTATION, FL 33317 Current Mailing Address: 4101 N.W. 4TH STREET 208 PLANTATION, FL 33317 FEI Number St.						
PLANTATION, FL 33317 Current Mailing Address: New Mailing Address: PLANTATION, FL 33317 FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: Name and Address of New Registered Agent: SANDERS, STEVE 3480 SOUTH ORCHARD ROAD EAST DAVIE, FL 33328 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 Date Electronic Signature of Registered Agent Date Electronic Title: P () Delete Name: TANNENBAUM, D.C., DR. RUSSELL Address: 2464 N UNIVERSITY DRIVE City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: DAVIE, FL 33328 City-St-Zip: DAVIE, FL 33328 Title: D () Delete Name: Address: 3480 SOUTH ORCHARD ROAD EAST City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address: 3480 SOUTH ORCHARD ROAD EAST City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address: A	Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
Current Mailing Address: Aton N.W. 4TH STREET 208 PLANTATION, FL 33317 FEI Number 82-0586647 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: SANDERS, STEVE 3480 SOUTH ORCHARD ROAD EAST DAVIE, FL 33328 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 Date Electronic Signature of Registered Agent Date Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P () Delete Name: TANNENBAUM, D.C., DR. RUSSELL Address: 2464 N UNIVERSITY DRIVE Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: DAVIE, FL 33328 City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address: Address: City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address: Address: City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address: Address: City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address: Address: City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: Address:		. 4TH STREET	-			
A101 N.W. 4TH STREET 208 PLANTATION, FL 33317 FEI Number 82-0586647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: SANDERS, STEVE 3480 SOUTH ORCHARD ROAD EAST DAVIE, FL 33328 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 Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P () Delete Title: () Change () Addition Name: Address: Address: Address: City-St-Zip: Title: VP () Delete Title: () Change () Addition Name: SANDERS, MSNJARNP, LAURIE C Name: Address: City-St-Zip: DAVIE, FL 33328 City-St-Zip: Title: () Change () Addition Name: Address: 4101 NW 4TH ST, STE 208 Address: 4101 NW 4TH ST, STE 208		ON, FL 33317	7			
PLANTATION, FL 33317 FEI Number: 82-0586647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: SANDERS, STEVE 3480 SOUTH ORCHARD ROAD EAST DAVIE, FL 33328 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 Date Address: 446 N UNIVERSITY DRIVE Address: Title: () Change () Addition Name: Address: 4101 NW 47H 5T, STE 208 Address: 4101 NW 47H 5T, STE 208 Address: 4101 NW 47H 5T, STE 208	Current Mailing Address:			New Mailing Address:		
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in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: P () Delete Title: () Change () Addition Name: TANNENBAUM, D.C., DR. RUSSELL Address: 2464 N UNIVERSITY DRIVE Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: PEMBROKE PINES, FL 33024 Title: VP () Delete Title: () Change () Addition Name: SANDERS, MSN/ARNP, LAURIE C Address: 3480 SOUTH ORCHARD ROAD EAST City-St-Zip: DAVIE, FL 33328 City-St-Zip: DAVIE, FL 33328 Title: D () Delete Title: () Change () Addition Name: ROSS, MD, DR. DAVID B Name: ROSS, MD, DR. DAVID B Address: 4101 NW 4TH ST, STE 208 Address: Address:	3480 SOU	JTH ORCHARI				
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	Name: Address:	ROSS, MD, DR 4101 NW 4TH	. DAVID B ST, STE 208	Name: Address:	() Change () Addition	

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: LAURIE C. SANDERS, MSN/ARNP VP 01/14/2004