

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051615

Entity Name: NAPLES INJURY CENTER, INC.

FILED
Apr 05, 2006
Secretary of State

Current Principal Place of Business:

2740 BAYSHORE DR
#17
NAPLES, FL 34112

New Principal Place of Business:

2740 BAYSHORE DR
#8-9
NAPLES, FL 34112

Current Mailing Address:

2740 BAYSHORE DR
#17
NAPLES, FL 34112

New Mailing Address:

2740 BAYSHORE DR
#8-9
NAPLES, FL 34112

FEI Number: 11-3688851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARGAS, LILIANA
2740 BAYSHORE DR
#17
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

VARGAS, LILIANA
2740 BAYSHORE DR
#8-9
NAPLES, FL 34112 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: CATALINA CARRERAS

04/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARRERAS, CATALINA
Address: 940 21 ST., SW
City-St-Zip: NAPLES, FL 34117

Title: VD () Delete
Name: VARGAS, LILIANA
Address: 902 E. 34 STREET
City-St-Zip: HIALEAH, FL 33013

Title: T () Delete
Name: CARRERAS, ALBERTO
Address: 920 21 ST. SW
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARRERAS, CATALINA
Address: 985 EVERGLADES BLVD SOUTH
City-St-Zip: NAPLES, FL 34117

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CARRERAS, ALBERTO
Address: 985 EVERGLADES BLVD SOUTH
City-St-Zip: NAPLES, FL 34117

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: CATALINA CARRERAS

PSDT

04/05/2006

Electronic Signature of Signing Officer or Director

Date