2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P04000159252

Entity Name: BOYNTON BEACH PAIN AND REHABILITATION, INC.

Current Principal Place of Business:

3459 WOOLBRIGHT RD
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

3459 WOOLBRIGHT RD
BOYNTON BEACH, FL 33436

New Mailing Address:

18339 NE 19TH AVE
NORTH MIAMI BEACH, FL 33179

FEI Number: 14-1918161 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FEDER, DANNY J
3459 WOOLBRIGHT RD
BOYNTON BEACH, FL 33436 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VTS ( ) Delete
Name: FEDER, DANNY S
Address: 3459 WOOLBRIGHT RD
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: FEDER, DANNY S
Address: 3459 WOOLBRIGHT RD
City-St-Zip: BOYNTON BEACH, FL 33436

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: DANNY FEDER PRES 04/23/2009

Electronic Signature of Signing Officer or Director Date