


**FILED**  
**Jun 21, 2007 8:00 am**  
**Secretary of State**

06-21-2007 90021 015 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

DOCUMENT # P05000133815		
1. Entity Name TRI-COUNTY PAIN ASSOCIATES, INC.		
Principal Place of Business 1647 ISLAND WAY WESTON, FL 33326	Mailing Address 1647 ISLAND WAY WESTON, FL 33326	
<b>DO NOT WRITE IN THIS SPACE</b>		

40121233



01082007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3559798	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERNSTEIN, JEFFREY I ESQ.  
 300 SE 2ND STREET  
 SUITE 860  
 FORT LAUDERDALE, FL 33301

8. The above named entity submits this statement for the purpose of the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

9. Et Tr

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2007 Fee will be \$550.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MANN, BRUCE M.D. 1647 ISLAND WAY WESTON, FL 33326
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

To whom this may concern,

This letter got miss placed. Can we please just pay the \$150?

Enclosed w the check for \$150.

I hope this is OK.

Sincerely,  
 Tri County Pain

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] Date: 4/10/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR