

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028942

FILED
Apr 01, 2008
Secretary of State

Entity Name: THE CENTER FOR BACK PAIN MANAGEMENT INC

Current Principal Place of Business:

8188 JOG ROAD SUITE 102
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

8188 JOG ROAD SUITE 102
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 20-4398382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINELLI, VINCENT
8188 JOG ROAD SUITE 102
BOYNTON BEACH, FL 33437 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: P () Delete
Name: MARTINELLI, VINCENT
Address: 8188 JOG ROAD SUITE 102
City-St-Zip: BOYNTON ROAD, FL 33437

Title: VP () Delete
Name: RENNELLA, FERNANDO
Address: 1553 TREVINO AVE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: MARTINELLI, VINCENT
Address: 8188 JOG ROAD SUITE 102
City-St-Zip: BOYNTON ROAD, FL 33437

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

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: VINCENT MARTINELLI

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date