2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000083873

City-St-Zip:

MIAMI, FL 33156

Entity Name: PREMIER PAIN CENTER, INC.

FILED Feb 26, 2007 Secretary of State

Current F	Principal Place of Business:	New Principal Place of	New Principal Place of Business:	
1111 BRICKELL AVENUE STE 2050 MIAMI, FL 33131		5975 SUNSET DRIVE 804 MIAMI, FL 33143		
Current I	Mailing Address:	New Mailing Address:	New Mailing Address:	
1111 BRICKELL AVENUE STE 2050 MIAMI, FL 33131		5975 SUNSET DRIVE 804 MIAMI, FL 33143	804	
FEI Numbe	r: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name an	d Address of Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
FROST, I 1111 BRI MIAMI, FL	CKELL AVENUE STE 2050			
	e named entity submits this statement for the of Florida.	ne purpose of changing its registered	office or registered agent, or both,	
SIGNATU	JRE:			
	Electronic Signature of Registered	Agent	Date	
Election Ca	ampaign Financing Trust Fund Contribution ().			
OFFICER	RS AND DIRECTORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	D () Delete SUAREZ, ERMILIO 10601 S.W. 69TH AVE	Title: (Name: Address:) Change () Addition	

City-St-Zip:

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: EMILIO SUAREZ PRES 02/26/2007