

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087626

FILED
Mar 08, 2010
Secretary of State

Entity Name: LASER PAIN CENTER OF LAKE LAND, INC

Current Principal Place of Business:

3650 INNOVATION DR.
LAKE LAND, FL 33812

New Principal Place of Business:

200 ALLAMANDA DRIVE
SUITE B
LAKE LAND, FL 33803

Current Mailing Address:

3162 THOROUGH BRED LOOP W.
LAKE LAND, FL 33811

New Mailing Address:

FEI Number: 26-0705893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, RON R
3162 THOROUGH BRED LOOP W.
LAKE LAND, FL 33811 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: PD
Name: EDWARDS, HELEN L
Address: 3162 THOROUGH BRED LOOP W.
City-St-Zip: LAKE LAND, FL 33811

Title: VPD
Name: EDWARDS, RON R
Address: 3162 THOROUGH BRED LOOP W.
City-St-Zip: LAKE LAND, FL 33811

I hereby 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 all other like empowered.

SIGNATURE: HELEN L. EDWARDS

PD

03/08/2010

Electronic Signature of Signing Officer or Director

Date