2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2011
Secretary of State

DOCUMENT# P08000055739

Entity Name: SOUTH FLORIDA PAIN & REHABILITATION CENTER CORP.

Current Principal Place of Business:

16244 SOUTH MILITARY TRAIL,
470
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

1600 S FEDERAL HWY
390
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 22-3979891 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

OFFICERS AND DIRECTORS:

Title: DR
Name: FEDER, DANIEL
Address: 1600 S FEDERAL HWY
City-St-Zip: POMPANO BEACH, FL 33062

Title: DVT
Name: RUBIN, ANDREW
Address: 16244 SOUTH MILITARY TRAIL, #470
City-St-Zip: DELRAY BEACH, FL 33484

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: DANNY FEDER PRES 03/17/2011

Electronic Signature of Signing Officer or Director — Date