

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000072142

FILED
Dec 02, 2009
Secretary of State

Entity Name: FULL SERVICE PAIN MANAGEMENT INC.

Current Principal Place of Business:

3107 W HALLANDALE BEACH BLVD, STE 102
PEMBROKE PARK, FL 33009

New Principal Place of Business:

Current Mailing Address:

3107 W HALLANDALE BEACH BLVD, STE 102
PEMBROKE PARK, FL 33009

New Mailing Address:

FEI Number: 26-3106189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDBERG, GARRY MD
3400 CORAL WAY
600
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

JAVIER BANOS, ESQ PA
3126 CORAL WAY
MIAMI, FL 33145 US

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: JAVIER BANOS

12/02/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: FRIEDBERG, GARRY MD
Address: 3400 CORAL WAY SUITE# 600
City-St-Zip: MIAMI, FL 33145

Title: CFO () Delete
Name: VILLAR, JOSUE I
Address: 3400 CORAL WAY SUITE# 600
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: FRIEDBERG, GARRY MD
Address: 3128 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: CFO (X) Change () Addition
Name: VILLAR, JOSUE I
Address: 3128 CORAL WAY
City-St-Zip: MIAMI, FL 33145

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: J VILLAR

CFO

12/02/2009

Electronic Signature of Signing Officer or Director

Date