2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2012
Secretary of State

DOCUMENT# P09000086108

Entity Name: BENAZET PAIN MANAGEMENT & REHAB CENTER, INC.

Current Principal Place of Business:

7235 CORAL WAY
SUITE #205
MIAMI, FL 33155

New Principal Place of Business:

7235 CORAL WAY
SUITE #207
MIAMI, FL 33155

Current Mailing Address:

7235 CORAL WAY
SUITE 205
MIAMI, FL 33155

New Mailing Address:

7235 CORAL WAY
SUITE 207
MIAMI, FL 33155

FEI Number: 27-1163125 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BENAZET, TULIA R
7235 CORAL WAY STE 205
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

BENAZET, TULIA R
7235 CORAL WAY STE 207
MIAMI, FL 33155 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: TULIA R BENAZET 01/08/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BENAZET, TULIA R MD
Address: 7235 CORAL WAY STE 207
City-St-Zip: MIAMI, FL 33155

Title: VD
Name: BENAZET, HUGO E MD
Address: 7235 CORAL WAY STE 207
City-St-Zip: MIAMI, FL 33155

Title: SD
Name: PEREZ, CARIDAD
Address: 7235 CORAL WAY STE 207
City-St-Zip: MIAMI, FL 33155

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: TULIA R. BENAZET PD 01/08/2012
Electronic Signature of Signing Officer or Director Date