

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000040994

FILED
Jan 26, 2012
Secretary of State

Entity Name: PAIN RELIEF CLINIC OF HOMESTEAD CORP.

Current Principal Place of Business:

311 NE 8 ST
101
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

311 NE 8 ST
101
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 27-1404982 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BETTER LIFE HOME HEALTH INC
10300 SW 72 ST
155
MIAMI, FL 33173 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: P
Name: SALGADO, ULISES
Address: 311 NE. 8 ST SUITE #101
City-St-Zip: MIAMI, FL 33030

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: ULISES SALGADO

P

01/26/2012

Electronic Signature of Signing Officer or Director

Date