2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 10, 2014
Secretary of State

DOCUMENT# P11000096941

Entity Name: GSA REHABILITATION AND PAIN MANAGEMENT, INC

Current Principal Place of Business:

10511 CORAL KEY AVENUE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10511 CORAL KEY AVENUE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 45-3747042 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARCIA, AVELINO T
10511 CORAL KEY AVENUE
TAMPA, FL 33647 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: AVELINO GARCIA

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: GARCIA, SHAINA KATHLEE
Address: 10511 CORAL KEY AVENUE
City-St-Zip: TAMPA, FL 33647 US

Title: CFO
Name: GARCIA, AVELINO
Address: 10511 CORAL KEY AVENUE
City-St-Zip: TAMPA, FL 33647 US

Title: VP
Name: GARCIA, GLADYS JOYCE
Address: 10511 CORAL KEY AVENUE
City-St-Zip: TAMPA, FL 33647 US

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: AVELINO GARCIA CFO 07/10/2014

Electronic Signature of Signing Officer or Director — Date