

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000018158

FILED  
May 01, 2006  
Secretary of State

Entity Name: SOUTH FLORIDA PAIN RELIEF MANAGEMENT, INC.

## Current Principal Place of Business:

1490 W 49TH PLACE  
SUITE 390  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

1490 W 49TH PLACE  
SUITE 390  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 65-0392790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, CELESTINO  
1490 W 49 PLACE  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

LOPEZ, CELESTINO  
1490 W 49 PLACE  
SUITE 390  
HIALEAH, FL 33012 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:

05/01/2006

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: PD ( ) Delete  
Name: LOPEZ, CELESTINO  
Address: PO BOX 4010  
City-St-Zip: HIALEAH, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOPEZ, CELESTINO  
Address: 5081 SW 128 AVE.  
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the 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: CELESTINO LOPEZ

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date