

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000002781

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: CRISAN PHYSIOTHERAPY AND SPORTS MEDICINE CENTER P.A.

**Current Principal Place of Business:**

1500 JOY RD  
DELRAY BEACH, FL 334826573

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6573  
DELRAY BEACH, FL 334826573

**New Mailing Address:**

FEI Number: 65-0458978      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CRISAN, OLIVER  
15200 JOG RD  
DELRAY BEACH, FL 33446      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: CRISAN, OLIVER  
Address: 1500 JOY RD STE C-4  
City-St-Zip: DELRAY BEACH, FL 33446

Title: ST ( ) Delete  
Name: CRISAN, OLIVER  
Address: 15200 JOY RD STE C-4  
City-St-Zip: DELRAY BEACH, FL 33446

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: OLIVER CRISAN UD

SEC

02/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date