

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000091127

FILED
May 09, 2007
Secretary of State

Entity Name: MIAMI SHORES PAIN RELIEF CENTER, P.A.

Current Principal Place of Business:

1948 N.E. 123RD ST.
SUITE 103
N. MIAMI, FL 33181

New Principal Place of Business:

9526 NE 2ND AVE
SUITE 203
MIAMI SHORES, FL 33138

Current Mailing Address:

1948 N.E. 123RD ST.
SUITE 103
N. MIAMI, FL 33181

New Mailing Address:

9526 NE 2ND AVE
SUITE 203
MIAMI SHORES, FL 33138

FEI Number: 65-0705408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, RUBEN R D.C.
1948 N.E. 123RD ST.
SUITE 103
N. MIAMI, FL 33181 US

Name and Address of New Registered Agent:

MOSS, RUBEN R D.C.
9526 NE 2ND AVE
SUITE 203
MIAMI SHORES, FL 33138 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: RUBEN R MOSS D.C.

05/09/2007

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: P () Delete
Name: MOSS, RUBEN R DR,DC
Address: 1948 N.E. 123RD STREET, STE. 103
City-St-Zip: N. MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOSS, RUBEN R DR,DC
Address: 9526 NE 2ND AVE
City-St-Zip: MIAMI SHORES, FL 33138

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: RUBEN R. MOSS D.C.

P

05/09/2007

Electronic Signature of Signing Officer or Director

Date