

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 21 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000014634 (4)  
1. Corporation Name  
PAIN SOLUTIONS HEALTH SYSTEMS, INC.



Principal Place of Business 150 S.W. 12TH AVENUE 2ND FLOOR POMPANO BEACH FL 33069	Mailing Address 150 S.W. 12TH AVENUE 2ND FLOOR POMPANO BEACH FL 33069
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/13/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0735764	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent A Z REGISTERED AGENTS CORPORATION 2601 S. BAYSHORE DRIVE SUITE 1600 MIAMI FL 33133				10. Name and Address of New Registered Agent			
				81	Name JASON UNGER		
				82	Street Address (P.O. Box Number is Not Acceptable) 150 SW 12 Avenue		
				83	Suite 201		
				84	City Pompano Beach	85	Zip Code FL 33069

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  JASON UNGER 1/26/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
1.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP				P/S/D JOHN BEEBE 150 S. Andrews Avenue # 200 Pompano Beach, FL 33069			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
2.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP				V/T/D STUART BERNSTEIN 150 S. Andrews Avenue #200 Pompano Beach, FL 33069			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
3.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP				V/D Ruben Paradela 150 S. Andrews Avenue #200 Pompano Beach, FL 33069			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
4.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP				D Robert Bernstein 150 S. Andrews Avenue #200 Pompano Beach, FL 33069			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP							
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP							

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  ROBERT BERNSTEIN 1/29/98 9547814500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2ED034 (10/97)