2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000100832

FILED Apr 10, 2012 Secretary of State

Entity Name: KETI MEDICAL CENTER & PAIN MANAGEMENT INC

Current Principal Place of Business:		New Principal Place o	f Business:	
4675 LAKE IN THE WOOI SPRINGHILL, FL 34607	DS DR.			
Current Mailing Address:		New Mailing Address:		
4675 LAKE IN THE WOOI SPRINGHILL, FL 34607	DS DR.			
FEI Number: 59-3478878	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
SWAIN, SHYAM 4675 LAKE IN THE WOOI SPRINGHILL, FL 34607				
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:				
Electroni	c Signature of Registered Age	nt	Date	

OFFICERS AND DIRECTORS:

Title: P.S

Name: SWAIN, SHYAM

Address: 4675 LAKE IN THE WOODS DR. City-St-Zip: SPRINGHILL, FL 34607

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: SHYAM SWAIN PS 04/10/2012