

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000102407

FILED  
Apr 06, 2004  
Secretary of State

Entity Name: ADVANCED PAIN RELIEF CENTER, INC.

**Current Principal Place of Business:**

6538 W ATLANTIC BLVD  
MARGATE, FL 33063 US

**New Principal Place of Business:**

**Current Mailing Address:**

6538 W ATLANTIC BLVD  
MARGATE, FL 33063 US

**New Mailing Address:**

2031 W. OAKLAND PARK BLVD  
SUITE 100  
FORT LAUDERDALE, FL 33311 US

FEI Number: 65-0798363

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RECHTER, MICHAEL  
201 W OAKLAND PARK BLVD  
FORT LAUDERDALE, FL 33311 US

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

RECHTER, MICHAEL  
2031 W. OAKLAND PARK BLVD  
SUITE 100  
FORT LAUDERDALE, FL 33311 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/06/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RECHTER, MICHAEL  
Address: 6538 WEST ATLANTIC BLVD.  
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete  
Name: WEINTRAUB, BRIAN  
Address: 6538 WEST ATLANTIC BLVD.  
City-St-Zip: MARGATE, FL 33063

**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 for the exemption stated in Section 119.07(3)(i), 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: MICHAEL RECHTER

D

04/06/2004

Electronic Signature of Signing Officer or Director

Date