2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2006
Secretary of State

DOCUMENT# P97000105817

Entity Name: PAIN AND REHABILITATION NETWORK, INC.

Current Principal Place of Business:

1564 KINGSLEY AVE.
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

1030 N. ORANGE AVE.
SUITE 105
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-3485072 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICHOLAS III, DAVIS E
12200 W. COLONIAL DRIVE
SUITE 303
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

SIEGEL, NOELLE
1030 NORTH ORANGE AVENUE
SUITE 105
ORLANDO, FL 32801 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: NOELLE SIEGEL 01/16/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TRESCOT, ANDREA M
Address: 1564 KINGSLEY AVE.
City-St-Zip: ORANGE PK, FL 32073

Title: D ( ) Delete
Name: LUBINSKY, RANDY
Address: 1030 N. ORANGE AVE., SUITE 105
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: SZPORKA, MARK
Address: 1030 N. ORANGE AVE., SUITE 105
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: RANDY LUBINSKY D 01/16/2006
Electronic Signature of Signing Officer or Director Date