2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2006
Secretary of State

DOCUMENT# S23369

Entity Name: NEUROMUSCULAR MEDICAL CENTERS OF FLORIDA, P.A.

Current Principal Place of Business:

32820 US HIGHWAY 19 N
PALM HARBOR, FL 34684 US

New Principal Place of Business:

700 S HARBOUR ISLAND BLVD
#339
TAMPA, FL 33602 US

Current Mailing Address:

13014 N. DALE MABRY HWY
#354
TAMPA, FL 33618 US

New Mailing Address:

700 S HARBOUR ISLAND BLVD
#339
TAMPA, FL 33602 US

FEI Number: 59-3041034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIFULCO, SANTO STEVEN M.D.
13014 N. DALE MABRY HWY
#354
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

BIFULCO, SANTO STEVEN M.D.
700 S HARBOUR ISLAND BLVD
#339
TAMPA, FL 33602 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: S STEVEN BIFULCO MD 08/18/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: BIFULCO, S. STEVEN
Address: 13014 N. DALE MABRY HWY #354
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: BIFULCO MD, S. STEVEN
Address: 700 S HARBOUR ISLAND BLVD #339
City-St-Zip: TAMPA, FL 33602

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: S STEVEN BIFULCO MD PSTD 08/18/2006
Electronic Signature of Signing Officer or Director Date