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1997

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FLORIDA DEPARTMENT OF STATE

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Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # MACADO

101

TRAUMA & PAIN MANAGEMENT CENTERS, INC.  Principal Place of Business Mailing Address							
9785 SAN JOSE BLVD.	Mailing Address  STAN JOSE BLYD: JACKSONVILLE FL 68861		24237		i Bilbir galler eren	T WINST NINGE	31011 <del>10</del> 31
JACKSONVILLE FL 32257	JACKSONVILLE PL VERO		141-4 <i>35</i> 7	3. Date Incorporated or Qualified	3a. Date	of Last Re	anort
				06/22/1992	05/01		sport
2. Principal Place of Busiliess	2a. Mailing Address			4. FEI Number			plied For
1	26			59-3128420			l Applicable
Suite, Apt. #, etc. 2	Suite Apt. # etc.			5. Certificate of Status Desired		<b>88.75</b> A Fee Re	
City & State	City & State			6. Election Campaign Financing		\$5.00	<del></del>
	28	т		Trust Fund Contribution		Added to	o Fees
Zip Country 25	Z 0	Count	ry	8. This corporation has liability for	intangible tax		199.032,
25 9. Name and Address of Current	29 Registered Agent	30		Florida Statutes  10. Name and Address of New Re			
POLLAK, CHERYL		8	1 Name				
9765 SAN JOSE BLVD.		82 Street Addre		ess (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32257		Ľ	2 Onest Addit	533 (1.0. Box Hamber 13 Hot zicoophile			
<b></b>		8	3				
		8	4 City		[	85 Zip C	Code
1. Pursuant to the provisions of Sections 607 0507					┡┖╵		
agent Tam familiar with, and an cept the obliga- IGNATURE Separation representations are relative							
			tgent signstore require	ad when reinstating)	DATE CEDIS AND DI	IDECTOR	C IN 12
2. OFFICERS AND	DARECTORS	13.		od when reinstating) ADDITIONS/CHANGES TO OFFIC	CERS AND D		
2. OFFICERS AND ILE PST		13. 1.1 Tilef			CERS AND D	RECTOR:	
Z. OFFICERS AND  THE PST  AME POLLAK, SANFORD	DARECTORS	13. 1.1 TITE 1.2 NAM			CERS AND D		
PST           IME         POLLAK, SANFORD           REFLADORESS         3836 N.E. 19TH ST. CIR	DARECTORS	13. 1.1 TITU 1.2 NAM 1.3 STRE	E		CERS AND D		
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