

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000037380

Entity Name: FLORIDA PAIN & REHABILITATION INSTITUTE, INC.

Current Principal Place of Business:

5365 WEST ATLANTIC AVENUE
504
DELRAY BEACH, FL 33484

Current Mailing Address:

5365 WEST ATLANTIC AVENUE
504
DELRAY BEACH, FL 33484

FEI Number: 65-1092714

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JUNGREIS, ALEXANDER
5365 WEST ATLANTIC AVENUE
504
DELRAY BEACH, FL 33484 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: ALEXANDER JUNGREIS

03/06/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name JUNGREIS, ALEXANDER
Address 5365 WEST ATLANTIC AVENUE
504
City-State-Zip: DELRAY BEACH FL 33484

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: JUNGREIS ALEXANDER

DIRECTOR

03/06/2014

Electronic Signature of Signing Officer/Director Detail

Date