

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000096768

Entity Name: BERKOWER PAIN & SPINE REHABILITATION, INC

Current Principal Place of Business:

1 SW 129TH AVENUE,
SUITE 305
PEMBROKE PINES, FL 33027

Current Mailing Address:

1 SW 129TH AVENUE,
SUITE 305
PEMBROKE PINES, FL 33027 US

FEI Number: 27-4188564

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERKOWER, EVE
3841 N. 44 AVENUE
HOLLYWOOD, FL 33021 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: EVE BERKOWER

01/12/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P,S
Name BERKOWER, DAVID L
Address 3841 N. 44 AVENUE
City-State-Zip: HOLLYWOOD FL 33021

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: DAVID BERKOWER

MANAGER

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date