

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000096941

**FILED
Jun 16, 2015
Secretary of State
CC8479568728**

Entity Name: GSA REHABILITATION AND PAIN MANAGEMENT, INC

Current Principal Place of Business:

10511 CORAL KEY AVENUE
TAMPA, FL 33647

Current Mailing Address:

10511 CORAL KEY AVENUE
TAMPA, FL 33647

FEI Number: 45-3747042

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, AVELINO T
10511 CORAL KEY AVENUE
TAMPA, FL 33647 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GARCIA, SHAINA KATHLEE
Address 10511 CORAL KEY AVENUE
City-State-Zip: TAMPA FL 33647

Title CFO
Name GARCIA, AVELINO
Address 10511 CORAL KEY AVENUE
City-State-Zip: TAMPA FL 33647

Title VP
Name GARCIA, GLADYS JOYCE
Address 10511 CORAL KEY AVENUE
City-State-Zip: TAMPA FL 33647

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: AVELINO GARCIA

REGISTERED AGENT

06/16/2015

Electronic Signature of Signing Officer/Director Detail

Date