2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2021
Secretary of State
7334394031CC

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Entity Name: FLORIDA INJURY MEDICAL CENTERS INC

Current Principal Place of Business:

PO BOX 1267
NEW SMYRNA BEACH, FL 32170

Current Mailing Address:

2805 CASANOVA CT.
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 37-1697763

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUFFMAN, YOUNG
2805 CASANOVA COURT
NEW SMYRNA BEACH, FL 32168 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	SECRETARY	Title	VP
Name	HUFFMAN, KEVIN	Name	HUFFMAN, YOUNG
Address	2805 CASANOVA CT.	Address	2805 CASANOVA COURT
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	PRESIDENT/OWNER
Name	HUFFMAN, KEVIN
Address	2805 CASANOVA CT.
City-State-Zip:	NEW SMYRNA BEACH FL 32168

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: KEVIN D. HUFFMAN SECRETARY 02/04/2021

Electronic Signature of Signing Officer/Director Detail — Date