

AC#2664473

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
08/31/2007	MA 34686	108023

The **MESSAGE THERAPIST**
 named below has met all requirements of
 the laws and rules of the state of Florida.
 Expiration Date: **AUGUST 31, 2009**
PAUL H WURCZEL
 7300 AMBERLY LANE
 APT 405
 DELRAY BEACH, FL 33446

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LICENSEE SIGNATURE

Charlie Crist
GOVERNOR

Ana M. Viamonte Ros, M.D., M.P.H.
STATE SURGEON GENERAL

DISPLAY IF REQUIRED BY LAW