P03000105433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:
P & G MEDICAL REHAB CENTER INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
8401 BARRET PLACE
TAMPA,FLORIDA 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
REHAB CENTER/PHYSICAL THERAPY

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ARTICLE IV SHARES

The number of shares of stock is:
500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JOSE PUJOLS
8401 BARRET PLACE
TAMPA,FLORIDA33617
PRESIDENT

MARIO GENAO
8401 BARRET PLACE
TAMPA,FLORIDA 33617
SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is:

JOSE PUJOLS
8401 BARRET PLACE
TAMPA,FLORIDA 33617

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

JOSE PUJOLS
8401 BARRET PLACE
TAMPA,FLORDA 33617

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent
Jose Pujols

09/19/2003
Date

Signature/Incorporator
Jose Pujols

09/19/2003
Date