2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2012
Secretary of State

DOCUMENT# P08000081939

Entity Name: HOPE REHABILITATION CARE, INC

Current Principal Place of Business:

400 CHURCH STREET AT DRURY AVENUE
KISSIMMEE, FL 34741 US

New Principal Place of Business:

801 W. OAK ST.
104
KISSIMMEE, FL 34741 US

Current Mailing Address:

400 CHURCH STREET AT DRURY AVENUE
KISSIMMEE, FL 34741 US

New Mailing Address:

801 W. OAK STREET
104
KISSIMMEE, FL 34741 US

FEI Number: 26-3297571 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IIRIZARRY, CESAR O DR.
5771 CROWNTREE LANE
203 BLDG. 5
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

IIRRIZARY, CESAR O DR.
5771 CROWNTREE LANE
203 BLDG. 5
ORLANDO, FL 32829 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: CESAR O. IRRIZARY 01/26/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: IRIZARRY, CESAR O DR.
Address: 5771 CROWNTREE LANE # 203 BLDG. 5
City-St-Zip: ORLANDO, FL 32829 US

Title: VP
Name: MARTINEZ, WILFREDO
Address: 3312 PEGO STREET
City-St-Zip: SEBRING, FL 33870

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: CESAR O. IRRIZARY P 01/26/2012
Electronic Signature of Signing Officer or Director Date