

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035659

FILED
Sep 15, 2010
Secretary of State

Entity Name: SUNCARE PHYSICAL THERAPY, INC.

Current Principal Place of Business:

5803 NW 151 ST.
SUITE 101
MIAMI LAKES, FL 33014

New Principal Place of Business:

5803 NW 151 STREET
SUITE 101
MIAMI LAKES, FL 33014

Current Mailing Address:

5803 NW 151 ST.
SUITE 101
MIAMI LAKES, FL 33014

New Mailing Address:

5803 NW 151 STREET
SUITE 101
MIAMI LAKES, FL 33014

FEI Number: 65-0662258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENTINE, RENFORD
3995 SW 139 AVE
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

ARRIETTA, ASTRID
5803 NW 151 STREET
SUITE 101
MIAMI LAKES, FL 33014 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: ASTRID ARRIETTA

09/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTSD
Name: ARRIETTA, ASTRID
Address: 5803 NW 151 STREET SUITE 101
City-St-Zip: MIAMI LAKES, FL 33014

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: ASTRID ARRIETTA

PTSD

09/15/2010

Electronic Signature of Signing Officer or Director

Date