

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007985

Entity Name: ALTERNATIVE TREATMENT & REHABILITATION SERVICES, INC

Current Principal Place of Business:

2144 SW 82ND PLACE
MIAMI, FL 33155

Current Mailing Address:

2144 SW 82ND PLACE
MIAMI, FL 33155

FEI Number: 55-0846655

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MINERVINI, JOANN
2144 SW 82ND PLACE
MIAMI, FL 33155 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 PSTD
Name MINERVINI, GARY E
Address 2144 SW 82ND PLACE
City-State-Zip: MIAMI FL 33155

Title D
Name MINERVINI, RON E
Address 2171 SW PANTHER TRACE
City-State-Zip: STUART FL 34997

Title D
Name NARDO, VAL
Address 875 FITCH DR
City-State-Zip: WEST PALM BEACH FL 33415

Title D
Name NELSON, JEFF
Address 6250 WILES RD APT 9-101
City-State-Zip: POMPANO BEACH FL 33067

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY E MINERVINI

PSTD

04/09/2013

Electronic Signature of Signing Officer/Director Detail

Date