

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104546

Entity Name: MED DIAGNOSTIC REHAB OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

1085 KANE CONCOURSE
BAY HARBOR ISLAND, FL 33154

Current Mailing Address:

1085 KANE CONCOURSE
BAY HARBOR ISLAND, FL 33154

FEI Number: 11-3654326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARCUS, ALAN JESQ.
20803 BISCAYNE BOULEVARD
SUITE 301
AVENTURA, FL 33180 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 P
Name HOFFMAN, RICHARD
Address 1085 KANE CONCOURSE
City-State-Zip: BAY HARBOR ISLANDS FL 33154

Title VP/S
Name WITTELS, MICHAEL B
Address 1085 KANE CONCOURSE
City-State-Zip: BAY HARBOR ISLANDS FL 33154

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: HOFFMAN, RICHARD

P

03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date