2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2014
Secretary of State
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Entity Name: REHAB SOLUTIONS OF MIAMI LAKES, INC.

Current Principal Place of Business:

6300 PENT PLACE
MIAMI, FL 33014

Current Mailing Address:

5840 NORTHWEST 194 TERRACE
MIAMI, FL 33015

FEI Number: 20-2280317

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, ROSEMARY
6300 PENT PLACE
MIAMI, 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD	Title	STD
Name	FERNANDEZ, ROSEMARY	Name	SALAS, CRISTINA
Address	6300 PENT PLACE	Address	6300 PENT PLACE
City-State-Zip:	MIAMI FL 33014	City-State-Zip:	MIAMI 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: ROSEMARY FERNANDEZ PD 04/01/2014

Electronic Signature of Signing Officer/Director Detail — Date