

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000023996

**Entity Name:** ABE REHABILITATION SERVICES, PA

**Current Principal Place of Business:**

6800 SHETLAND WAY  
SARASOTA, FL 34241

**Current Mailing Address:**

6800 SHETLAND WAY  
SARASOTA, FL 34241 US

**FEI Number:** 20-4421661

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BSHOT, SOHEIR  
6800 SHETLAND WAY  
SARASOTA, FL 34241 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            MOUSA, ALFRED  
Address        5294 VISIONARY CT  
City-State-Zip: SARASOTA FL 34233

*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:** ALFRED MOUSA

P

04/24/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date