

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000084944

Entity Name: FUNCTIONAL REHAB INC

Current Principal Place of Business:

123 US 27., S.
LAKE PLACID, FL 33852

Current Mailing Address:

123 US 27., S.
LAKE PLACID, FL 33852 US

FEI Number: 27-1184109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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 PVST
Name VILLAMOR, NOSTER
Address 123 US 27., S.
City-State-Zip: LAKE PLACID FL 33852

Title D
Name VILLAMOR, NOSTER
Address 123 US 27., S.
City-State-Zip: LAKE PLACID FL 33852

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: NOSTER VILLAMOR

PRESIDENT

03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date