2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 12, 2014
Secretary of State
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Entity Name: DYNAMIC THERAPY AND REHABILITATION CENTER INC

Current Principal Place of Business:

3964 N.W. 167 STR.
MIAMI GARDENS, FL 33054

Current Mailing Address:

3964 N.W. 167 STR.
MIAMI GARDENS, FL 33054

FEI Number: 90-0542891

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALONZO, LUIS
3964 N.W. 167 STR.
MIAMI GARDENS, FL 33054 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
Name	ALONZO, LUIS
Address	3964 N.W. 167 STR.
City-State-Zip:	MIAMI GARDENS FL 33054

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: LUIS ALONZO PRESIDENT 06/12/2014

Electronic Signature of Signing Officer/Director Detail — Date