

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000030483

Entity Name: ESSENTIAL WELLNESS REHAB CENTER, INC.

Current Principal Place of Business:

3730 COCONUT CREEK PARKWAY
SUITE 180
POMPANO BEACH, FL 33066

Current Mailing Address:

3730 COCONUT CREEK PARKWAY
SUITE 180
POMPANO BEACH, FL 33066

FEI Number: 27-2336630

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOLTZ, ROBERT B
3730 COCONUT CREEK PARKWAY SUITE 180
POMPANO BEACH, FL 33066 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 STOLTZ, ROBERT B
Address 5701 N FEDERAL HWY
City-State-Zip: BOCA RATON FL 33487

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: ROBERT STOLTZ

PRESIDENT

04/11/2013

Electronic Signature of Signing Officer/Director Detail

Date