

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000009116

Entity Name: TO LIFE REHABILITATION CENTER, INC.**Current Principal Place of Business:**17275 COLLINS AVENUE #308
SUNNY ISLES BEACH, FL 33160**Current Mailing Address:**17275 COLLINS AVENUE #308
SUNNY ISLES BEACH, FL 33160**FEI Number:** 27-4697562**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SUGAR, MICHAEL
17275 COLLINS AVENUE #308
SUNNY ISLES BEACH, FL 33160 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	DR
Name	SUGAR, MICHAEL
Address	17275 COLLINS AVENUE #308
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	MR
Name	SUGAR, ROBERT
Address	17275 COLLINS AVENUE #308
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	MR
Name	SUGAR, LESLIE
Address	17275 COLLINS AVENUE #308
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	DIRECTOR
Name	FISCHMAN, OLIVIA
Address	17275 COLLINS AVENUE #308
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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: LESLIE SUGAR**CFO****01/07/2018**

Electronic Signature of Signing Officer/Director Detail

Date