2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2014
Secretary of State
CC1586644152

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Entity Name: THEREX REHAB INC

Current Principal Place of Business:

6135 NW 167 STREET
SUITE E-18
MIAMI LAKES, FL 33015

Current Mailing Address:

6135 NW 167 STREET
SUITE E-18
MIAMI LAKES, FL 33015

FEI Number: 45-5380683

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAZQUEZ, MARIA M
6135 NW 167 STREET
SUITE E-18
MIAMI LAKES, FL 33015 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	PSTD
Name	VASQUEZ, MARIA M
Address	6135 NW 167 STREET
City-State-Zip:	MIAMI LAKES FL 33015

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: MARIA VASQUEZ PSTD 02/11/2014

Electronic Signature of Signing Officer/Director Detail — Date