#### 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000038550

Entity Name: INSTITUTE OF REHABILITATION EDUCATION AND TRAINING,

INC.

FILED Feb 14, 2018 Secretary of State CC7705195385

#### **Current Principal Place of Business:**

14260 WEST NEWBERRY ROAD #239

NEWBERRY, FL 32669

## **Current Mailing Address:**

14260 WEST NEWBERRY ROAD #239 NEWBERRY, FL 32669 US

FEI Number: 47-3479364 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

POMERANZ, JAMIE L 14260 WEST NEWBERRY ROAD #239 NEWBERRY, FL 32669 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: JAMIE POMERANZ 02/14/2018

Electronic Signature of Registered Agent Date

# Officer/Director Detail:

 Title
 CEO
 Title
 CFO

 Name
 POMERANZ, JAMIE L
 Name
 YU, NAMI

Address 13117 SW 6TH AVE Address 10827 NW 18TH COURT

City-State-Zip: NEWBERRY FL 32669 City-State-Zip: GAINESVILLE FL 32606

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: NAMI YU CFO 02/14/2018