

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035659

Entity Name: SUNCARE PHYSICAL THERAPY, INC.

Current Principal Place of Business:

15524 NW 77CT
MIAMI LAKES, FL 33016

Current Mailing Address:

15524NW 77CT
MIAMI LAKES, FL 33016 US

FEI Number: 65-0662258

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARRIETA, ASTRID
15524NW 77CT
MIAMI LAKES, FL 33016 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 PTSD
Name ARRIETA, ASTRID
Address 15524NW 77CT
City-State-Zip: MIAMI LAKES FL 33016

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: ASTRID ARRIETA

PT

03/25/2015

Electronic Signature of Signing Officer/Director Detail

Date