

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000194484

Entity Name: REHAB MARKETING PROS LLC

Current Principal Place of Business:

4613 NORTH UNIVERSITY DRIVE, #468
CORAL SPRINGS, FL 33067

Current Mailing Address:

4613 NORTH UNIVERSITY DRIVE, #468
CORAL SPRINGS, FL 33067 US

FEI Number: 81-4175884

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Authorized Person(s) Detail :

Title MGR
Name SANTACROCE, SHANE
Address 4613 NORTH UNIVERSITY DRIVE,
#468
City-State-Zip: CORAL SPRINGS FL 33067

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHANE SANTACROCE

CEO

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date