

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000006816

**Entity Name:** MY REHAB CONSULTANTS LLC

**Current Principal Place of Business:**

3027 N. JAMES DRIVE  
SUFFOLK, VA 23435

**Current Mailing Address:**

3027 N. JAMES DRIVE  
SUFFOLK, VA 23435 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC.  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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:** HAVRE BILL

03/02/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name JANOWIAK, DENISE  
Address 3027 N. JAMES DRIVE  
City-State-Zip: SUFFOLK VA 23435

*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:** JANOWIAK, DENISE

MGR

03/02/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date