

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 91444 001 ***122.50

DOCUMENT # 708576

1. Entity Name
ACHIEVEMENT AND REHABILITATION CENTERS, INC.

Principal Place of Business 10250 NW 53RD STREET SUNRISE FL 33351	Mailing Address 10250 NW 53RD STREET SUNRISE FL 33351-8023
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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4. FEI Number 59-0809623	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
HAAS, DENNIS
10250 NW 53 STREET
SUNRISE FL 33351

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD RICHTER, JACOB 2600 NE 14TH ST. POMPANO BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D CHRETIEN, PETER C. 22 MINNETONKA ROAD SEA RANCH LAKES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD ROGERS, GORDON 200 S. BISCAYNE BLVD., STE. 3600 MIAMI FL 33131-2338	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D MARINER, JOHANTHAN D. 2267 NW 199 ST MIAMI FL 33056	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D LAYSTROM, WILLIAM, JR. 1177 SE 3RD AVENUE FT. LAUDERDALE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HAAS, DENNIS 2150 SW 28TH AVE FT LAUDERDALE FL 33312	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Joan Hinden 9709 Malvern Drive Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dennis A. Haas Dennis A. Haas, President/CEO 4/25/00 (954) 746-9400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

708576

14529

- D Irwin Bier
7750 Cherry Blossom Way
Boynton Beach, FL 33437

- D Melinda Eilender
604 NW 103 Avenue
Plantation, FL 33324

- D M. Austin Forman
American Marketing & Management
888 SE Third Avenue, Suite 501
Fort Lauderdale, FL 33316

- D George Kurtz
2781 Pine Island Rd. North
Sunrise, FL 33316

- D Paul Langlois
1910 NE 54 Street
Fort Lauderdale, FL 33308

- D Herbert Lubs, M.D.
University of Miami
Mailman Center
P.O. Box 016820
Miami, FL 33101

- D Julie B. Madsen
2752 Oak Tree Lane
Fort Lauderdale, FL 33309

- D Robin E. Miller, OTR/L, CHT
Fort Lauderdale Hand Clinic
2000 W. Commercial Blvd., Suite 101
Fort Lauderdale, FL 33309-3060

- D Steve L. Pattison, CPA
Burger King Corporation
17777 Old Cutler Road
Miami, FL 33157