FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003971 (7)

FILED May 15 1997 8:00am Secretary of State

NATION	IAL REHAB PROPERTIES, I	NC.				
Principal Place of Business Mailing Address 15925 NW 57 AVE 15925 NW 57 AVE MIAMI FL 33014 MIAMI FL 33014-8703				CANDING FILE IBIEF DRIAL DOWN BOUT T	TAK DUMI TOM U INNY ADAU TOD U	4 MQ (ADD)
				3. Date Incorporated or Qualified 08/17/1995	3a. Date of Last R 06/10/1996	leport
2. Principal Place of Business 2a. Mailing Address 21 //4/9 NW/13 LN 26 //4/9 NW/			/12 //	4. FEI Number		oplied For
21 // 4/ 7 Suile, Apt.		26 // / / / WW/ Suite, Apt. #, etc.	<i>b</i> 3 C/V	65-0439467	- 40 90	ot Applicable Additional
22	. 114 8 100	27		6. Certificate of Status Desired	M	equired
City & Stat	OICK FLA	City & State 28 KEDOILK	Feat	Election Campaign Financing Trust Fund Contribution		May Be to Fees
Z ₁ 0	Country	Zip	Country 30 USA.	8. This corporation has liability for	or intangible tax under s	
24 3168	9. Name and Address of Curre		30 037-	Florida Statutes 10. Name and Address of New I	Yes No	
AST	FROM, RICHARD	in riegistorea Agent	81 Name			
l	25 NW 57 AVE		82 Street A	A STROM RICHT ddress IP D Box Number is Not Accept		
	MI FL 33014		52 Sireer A	1/4/9 NW 12-3	,able)	
			83			
			84 City	REDDICK	FL 85 Zip	Sode FG
11 Dure cont	to the province of Sections 607.05	A2 and 607 1508 Florida Statute	s the above-named c	,		
office or	registered agent, a point in the Stat	e of Florida. Such change was au	uthorized by the corpo	corporation submits this statement for the pration's board of directors. I hereby acc	cept the appointment as	registered
	ans raminal with and a copy the obside	- VAIL VY LA		<i>1</i>	-4/25/87.	
SIGNATURE	Signature Type I extended name of legisterod as	gent and title if applicable (NCE)	ICHNIRO: signature	STALOMINING PRESIDENT	DATE	
12.	THE PARTY OF THE P	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF		
TILF	ACTOOM BIOMADO	☐ DELETE	1.1 TITLE	ASTROM, RICHARD	Change	Addition
NAME	ASTROM, RICHARD 651 WEST 68TH STREET		1.2 NAME	11415 NW 173 EN		
STREET ADDRESS	HIALEAH FL 33014		1.3 STREET ADDRESS	REDDICK FUT	32680	,
CHY-S*-ZIP	D	LX DELETE	1.4 City-ST-ZiP 2.1 TitlE	SELACTARY.	Change	Addition .
NAME	ASTROM, PAMELA	T	2.2 NAME	ASTROM, CHRISTOAH	sr	F .—
STREET ADDRESS	651 WEST 68TH STREET		2.3 STREET ADDRESS	11415 NW 123 2N		
CHY ST ZIE	HIALEAH FL 33014		2 4 CITY-ST-ZIP	REODILK, FLA	31.686.	
10116		DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADORESS			3.3 STREET ADDRESS			
CitriSt-ZIP		T 02.227	3 4. CITY-ST-ZIP		TIX	1.00-
THUS		☐ DELETE	4,1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
0/7Y-S1-7/P 1/11E		DELETE	4 4 CITY-ST-ZIP 51 TITLE		Change	Addition
NAME			5.2 NAME			
STHILE! ACCORESS			5.3 STREET ADDRESS			
CHY-ST ZIP			5.4 CITY-ST-ZIP			
TILLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS	İ		6.3 STREET ADDRESS			
City-St-ZF			64 CITY-ST-ZIP			
14. I do here	by certify that the information suppli	ed with this filing does not qualify	y for the exemption sta	ated in Section 119.07(3)(i), Florida Statuthat my signature shall have the same le	utes. I further certify that	the

information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that are an officer or director of the corporation of the recorder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 131 charged an analytichment with an address.

SIGNATURE:

SIGNATURE AND PRINTED HAVE OF SIGN

ASTROM, PRESIDENT

4/25/97

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