2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005
Secretary of State

DOCUMENT# J18229

Entity Name: RABINER REHABILITATION CENTER, INC.

Current Principal Place of Business:

8895 N. MILITARY TR.
SUITE D202
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

371 REGATTA DR.
JUPITER, FL 33477 US

Current Mailing Address:

P.O. BOX 32881
PALM BEACH GARDENS, FL 334202881 US

New Mailing Address:

FEI Number: 59-2684613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES A. CIOFFI
250 TEQUESTA DRIVE
SUITE 200
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RABINER, ARNE B PRESIDE
Address: 44 YACHT CLUB DR., APT 514
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RABINER, ARNE B PRESIDE
Address: 371 REGATTA DR.
City-St-Zip: JUPITER, FL 33477

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ARNE RABINER PRES 01/07/2005
Electronic Signature of Signing Officer or Director Date