

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000005567

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: REHAB PHYSICIANS SERVICES, LLC

Current Principal Place of Business:

1455 NW 14TH STREET
MIAMI, FL 33125

New Principal Place of Business:

1575 SAN IGNACIO AVENUE
5TH FLOOR
CORAL GABLES, FL 33146

Current Mailing Address:

1455 NW 14TH STREET
MIAMI, FL 33125

New Mailing Address:

1575 SAN IGNACIO AVENUE
5TH FLOOR
CORAL GABLES, FL 33146

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

METSCH, BENJAMIN
1455 NW 14TH STREET
MIAMI, FL 33125 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: METSCH, BENJAMIN
Address: 1455 NW 14TH STREET
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 608, Florida Statutes.

SIGNATURE: BENJAMIN METSCH MGR 04/30/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date