

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004587

FILED
Jul 31, 2007
Secretary of State

Entity Name: SOUTH BROWARD REHAB SERVICES LLC

Current Principal Place of Business:

1570 WEST 38 PLACE
#3 & #4
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1570 WEST 38 PLACE
3 & #4
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 45-0468262 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CAST, LOUIS F
4805 NW 79 AVENUE
SUITE # 9
DORAL, FL 33166 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAM, AYMARA
Address: 694 NW 127 AVENUE
City-St-Zip: MIAMI, FL 33182

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 exemption stated in Chapter 119, 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: AYMARA SAM

PRES

07/31/2007

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