

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046752

FILED
Jul 20, 2007
Secretary of State

Entity Name: UNITED HEALTH AND REHABILITATION CENTER LLC

Current Principal Place of Business:

3085 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

3085 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 US

New Mailing Address:

FEI Number: 54-2134924 **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:

NESTOR, MARC DC
3085 NE 163RD STREET
NORTH MIAMI BEACH, FL 33160 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: MGRM () Delete
Name: NESTOR, LILIAN
Address: 3085 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM () Delete
Name: NESTOR, MARC A DC
Address: 3085 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM () Delete
Name: NESTOR, JAMES DC
Address: 3085 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM () Delete
Name: NESTOR, MARIE
Address: 3085 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES:

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

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

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

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: MARC NESTOR

MGRM

07/20/2007

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