

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112266

Entity Name: REACTION REHAB LLC

FILED
Feb 11, 2008
Secretary of State

Current Principal Place of Business:

6619 SOUTH DIXIE HIGHWAY, SUITE 332
MIAMI, FL 33143

Current Mailing Address:

6619 SOUTH DIXIE HIGHWAY, SUITE 332
MIAMI, FL 33143

New Principal Place of Business:

420 SOUTH DIXIE HWY
4-D
MIAMI, FL 33146

New Mailing Address:

420 SOUTH DIXIE HWY
4-D
MIAMI, FL 33146

FEI Number: 22-3972126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

WIKLUND-SABA, MONICA C
420 SOUTH DIXIE HWY
4-D
MIAMI, FL 33146 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: MONICA C. WIKLUND-SABA

02/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SABA, MONICA C. W.
Address: 6619 SOUTH DIXIE HIGHWAY, SUITE 332
City-St-Zip: MIAMI, FL 33143

Title: MGR () Delete
Name: SABA, BEHZAD
Address: 6619 SOUTH DIXIE HIGHWAY, SUITE 332
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: SABA, MONICA C. W.
Address: 6619 SOUTH DIXIE HIGHWAY, SUITE 332
City-St-Zip: MIAMI, FL 33143

Title: T () Delete
Name: SABA, BEHZAD
Address: 6619 SOUTH DIXIE HIGHWAY, SUITE 332
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WIKLUND-SABA, MONICA C
Address: 420 SOUTH DIXIE HWY
City-St-Zip: MIAMI, FL 33146

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

Title: S (X) Change () Addition
Name: WIKLUND-SABA, MONICA C
Address: 6619 SOUTH DIXIE HIGHWAY, SUITE 332
City-St-Zip: MIAMI, FL 33143

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: BEHZAD SABA

MGR

02/11/2008

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