

2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000017236

FILED
Sep 20, 2012
Secretary of State

Entity Name: CARE REHAB CENTER, LLC

Current Principal Place of Business:

3900 NW 79TH AVENUE
219
MIAMI, FL 33166

New Principal Place of Business:

3900 NW 79TH AVENUE
225
MIAMI, FL 33166

Current Mailing Address:

2725 SW 114TH AVENUE
MIAMI, FL 33165

New Mailing Address:

3900 NW 79TH AVENUE
225
MIAMI, FL 33166

FEI Number: 77-0713357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EXPOSITO, AMARO M
2725 SW 114TH AVENUE
MIAMI, FL 33165 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/MANAGERS:

Title: MGR
Name: EXPOSITO, AMARO M
Address: 2725 SW 114TH AVENUE
City-St-Zip: MIAMI, FL 33165

I hereby 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: AMARO EXPOSITO

MGR

09/20/2012

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