

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039061

**FILED
Feb 17, 2011
Secretary of State**

Entity Name: BISCAYNE NEUROLOGIC REHABILITATION CENTER LLC

Current Principal Place of Business:

15921 BISCAYNE BLVD.
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

15921 BISCAYNE BLVD.
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 20-4223513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDIN, MICHAEL
15921 BISCAYNE BLVD.
NORTH MIAMI BEACH, FL 33160 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: GOLDIN, MICHAEL
Address: 15921 BISCAYNE BLVD.
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: MICHAEL GOLDIN P 02/17/2011

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