

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045676

FILED
Jan 05, 2012
Secretary of State

Entity Name: REHAB ASSOCIATES OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

2525 S.W. 75 AVENUE
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 561167
PINECREST, FL 33256

New Mailing Address:

FEI Number: 26-2591500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRA, MIGUEL G ESQ.
MORRISON, BROWN, ARGIZ & FARRA, LLP
1001 BRICKELL BAY DRIVE, 9TH FLOOR
MIAMI, FL 33131 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: VARGAS, JOSE LUIS MD
Address: PO BOX 145418
City-St-Zip: MIAMI, FL 33155

Title: MGR
Name: DE CARDENAS, MIKE
Address: 6230 SW 144 ST.
City-St-Zip: MIAMI, FL 33156

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: JOSE LUIS VARGAS

MGR

01/05/2012

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