

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000105509

FILED
Mar 21, 2012
Secretary of State

Entity Name: RIZO'S REHAB CENTER, LLC

Current Principal Place of Business:

7219 BENJAMIN ROAD
SUITE C
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

PO BOX 152644
TAMPA, FL 33684

New Mailing Address:

FEI Number: 27-3637323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIZO, YALILI
7219 BENJAMIN ROAD
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

FERNANDEZ RIZO, YOANA
6417 N BLOSSOM AVE
TAMPA, FL 33614 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: YOANA RIZO

03/21/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RIZO, YALILI
Address: 6417 N BLOSSOM AVE
City-St-Zip: TAMPA, FL 33614

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: YALILI RIZO

MGRM

03/21/2012

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