

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000120488

FILED
Apr 30, 2012
Secretary of State

Entity Name: TOTAL REHAB AND MEDICAL LLC

Current Principal Place of Business:

12177 PEMBROKE ROAD
PEMBROKE PINES, FL 33025

New Principal Place of Business:

12177 PEMBROKE ROAD
PEMBROKE PINES, FL 33025 UN

Current Mailing Address:

12177 PEMBROKE ROAD
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROZO, ASTRID
12177 PEMBROKE ROAD
PEMBROKE PINES, FL 33025 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: ROZO, ASTRID
Address: 12177 PEMBROKE RD
City-St-Zip: PEMBROKE PINES, FL 33025

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: ASTRID ROZO MRG 04/30/2012

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