2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2011
Secretary of State

DOCUMENT# M50284

Entity Name: SOUTHCOAST PHYSICAL THERAPY, INC.

Current Principal Place of Business:

4999 W 8TH AVE.
6
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4999 W 8TH AVE.
6
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-2788680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABTAHI, RASSOUL
4999 W 8TH AVE
6
HIALEAH, FL 330123409 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

OFFICERS AND DIRECTORS:

Title: D
Name: ABTAHI, RASSOUL
Address: 4999 W 8TH AVE SUITE 6
City-St-Zip: HIALEAH, FL 33012

Title: T
Name: ABTAHI, THARION
Address: 4999 W 8TH AVE SUITE 6
City-St-Zip: HIALEAH, FL 330123409

Title: K
Name: ABTAHI, KEIVAN
Address: 4999 W 8TH AVE SUITE 6
City-St-Zip: HIALEAH, FL 330123409

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THARION ABTAHI T 01/04/2011

Electronic Signature of Signing Officer or Director — Date