

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006337

FILED
Jan 19, 2009
Secretary of State

Entity Name: THE PARKINSON CHARITABLE REHABILITATION, INC.

Current Principal Place of Business:

9301 S.W. 56TH STREET
SUITE D
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9301 S.W. 56TH STREET
SUITE D
MIAMI, FL 33165

New Mailing Address:

FEI Number: 74-3221135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SASSO, PAUL R ESQUIRE
7721 S.W. 62ND AVENUE
SUITE 202
SOUTH MIAMI, FL 33143 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 () Delete
Name: GARCIA, OSVALDO J
Address: 9301 SW 56 STREET, SUITE D
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: DOMINGUEZ, ANTHONY
Address: 9301 SW 56 STREET, SUITE D
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: GONZALEZ, CARLOS M
Address: 9301 SW 56 STREET, SUITE D
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSVALDO GARCIA

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date