

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005225

1. Entity Name

NPF REHABILITATION, INC. - MISSOURI

**FILED**  
**Sep 12, 2001 8:00 am**  
**Secretary of State**

09-12-2001 90002 005 \*\*\*\*71.00

Principal Place of Business

1501 N.W. 9TH AVENUE  
 BOB HOPE ROAD  
 MIAMI FL 33136-9990

Mailing Address

1501 N.W. 9TH AVENUE  
 BOB HOPE ROAD  
 MIAMI FL 33136-9990

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0784112

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERICAN INFORMATION SERVICES, INC.  
 ONE S.E. 3RD AVENUE  
 28TH FLOOR  
 MIAMI FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS GELB, MARTIN  
 CITY-ST-ZIP 2801 LAKE AVENUE SUNSET ISLAND 1  
 MIAMI BEACH FL 33140

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS KRAVITZ, HAROLD  
 CITY-ST-ZIP 7600 WEST 20TH AVENUE SUITE 223  
 HIALEAH FL 33016

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS SLEWETT, NATHAN  
 CITY-ST-ZIP 1501 N.W. 9TH AVENUE  
 MIAMI FL 33136-9990

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS SLEWETT, ROBERT  
 CITY-ST-ZIP 17071 W DIXIE HWY  
 MIAMI BEACH FL 33160

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME S  
 STREET ADDRESS ZEMEL, HERBERT  
 CITY-ST-ZIP 4700 B SHERMAN ST  
 HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** Herbert Zemel 9/12/01 325,243.4830

CR2E037 (5/01)