

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 9:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P00000007995

1. Corporation Name

FLEX REHAB SERVICES, INC.

Principal Place of Business	Mailing Address
2873 OAKBROOK DRIVE WESTON FL 33332	2873 OAKBROOK DRIVE WESTON FL 33332

  
**REINSTATEMENT** 03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01/24/2000	
City & State		City & State		5. FEI Number	
Zip		Country		65-0975885	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> SR.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	SHOLTIS, EDWARD A	2873 OAKBROOK DRIVE	WESTON FL 33332

600024389966  
11/03/03--01033--021 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GOLDEN, RANDY C  
100 N. BISCAYNE BOULEVARD  
NEW WORLD TOWER - SUITE 2100  
MIAMI FL 33132

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State FL	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2116

(954) 989 7801

9/966 2112

## IMPORTANT FACTS

To maintain "active" status, every corporation must file, in a timely manner, with the Department of State, a corporation annual report/uniform business report.

Reports are due between January 1 and May 1 of each calendar year.

Second notice annual reports/uniform business reports, informing each corporation that it would be dissolved/revoked on or after September 10 if the report was not filed, were sent to the last address provided to this office by June 6th of this year.

This notice is being given to all corporations that have not filed their 2003 annual report/uniform business report as of September 19, 2003. If you feel your report and this notice have crossed in the mail, you may call (850) 245-6059 to verify the filing. You may disregard this notice if the 2003 annual report/uniform business report has been filed.

To return a dissolved/revoked corporation to "active" status, the corporation must reinstate. The form to reinstate is enclosed in this packet. The signatures of the registered agent and an officer or director must be on the reinstatement form. (If the same individual serves as the registered agent as well as an officer or director, he or she must sign in both capacities.)

\* Filing fee information to reinstate is shown on the back of the form. The reinstatement fee can be waived if the corporation did not receive the two prior uniform business report (UBR) notices. Our office will need to receive the completed application for reinstatement and the appropriate UBR filing fee and a letter, signed by an officer or director of the corporation, stating the prior UBR notices were not received. The fee to file the report without penalty is \$150.00 for a for-profit corporation and \$61.25 for a not-for-profit corporation.

If you have filing questions, call (850) 245-6059.

FLEX REHAB SERVICES, INC.  
2873 OAKBROOK DRIVE  
WESTON, FL 33332

October 21, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Attn: Division of Corporations Dept.

Dear Sir or Madam:

Please be advised that this was the first notice we received for the filing of the 2003 Uniform Business Report (UBR). We cannot understand why we had not received any previous notices. Had we received the initial Form, we would have certainly paid the tax promptly. We are sending the completed form with a check in the amount of \$150.00.

We respectfully request that you accept payment of \$150.00 and abate any penalties since it was not our intention to file late. After learning that we can now file and pay the tax online, we will file next years form online. Thank you very much in advance for your consideration in this matter.

Sincerely,



Edward A. Sholtis, President