2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P00000032077

Entity Name: WEST REHABILITATION CENTER, INC.

Current Principal Place of Business:

7900 NW 27 AVE, STE D-4
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 140151-0151
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 65-0994887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VAZQUEZ, BLANCA
1850 SW 8 ST
302
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

VAZQUEZ, BLANCA
7900 NW 27 AVE SUITE
D4
MIAMI, FL 33147 US

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: 04/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete
Name: VAZQUEZ, BLANCA
Address: 1850 SW 8 ST STE 302
City-St-Zip: MIAMI, FL 33135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition
Name: VAZQUEZ, BLANCA
Address: 7900 NW 27 AVE
City-St-Zip: MIAMI, FL 33147 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BLANCA A. VAZQUEZ PVST 04/30/2009
Electronic Signature of Signing Officer or Director — Date