## 2003 FOR PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR)**

## OCUMENT #

DOOOOOOOO



04-17-2003 90539 001 \*\*\*300.00

**FILED** 

Apr 17, 2003 8:00 am Secretary of State

DOCOMENT #  I. Entity Name  MILLENNIUM REHABILITATION	ON GROUP, INC.	
Principal Place of Business	Mailing Address	

1851 NW 125 AVE 1851 NW 125 AVE 280 PEMBROKE PINES FL 33028 PEMBROKE PINES FL 33028 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

1 1881/1981 III 50/II 88(II 68(II 88)I	<b>        </b>	\$414  <b>         </b>

CHECK HERE IF MAKING CHANGES

City & State		City & State		4. FEI Number 65-1037935	Applied For Not Applicable
Zip	Country	Zip	Country	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	
			Name		
GITELIS, MOF	श	•		<del></del>	

16400 ERIE PLACE DAVIE FL 33331

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9. Election Campaign Financing

Trust Fund Contribution.

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. I am familiar with, and accept the obligations of registered agent.

City

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. CU E NOW!!! EFF 10 6450.00

(NOTE: Registered Agent signature required when reinstating)

DATE

\$5.00 May Be Added to Fees

Zip Code

Applied For

FILE NOV	Miii LEE 12	\$150.00	
After May 1,	2003 Fee wil	il be \$550.00	
Make Check Payable	e to Florida 🛭	Department of	State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change ☐ Addition GITELIS, MORT NAME NAME 16400 ERIE PLACE STREET ADDRESS STREET ADDRESS DAVIE FL 33331 CITY-ST-ZIP CITY-ST-ZIP DST ☐ Delete TITLE Change Addition GITELIS, JOAN NAME NAME 16400 ERIE PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAVIE FL 33331 CITY-ST-ZIP TITLE ☐ Delete TITLE Change □ Addition

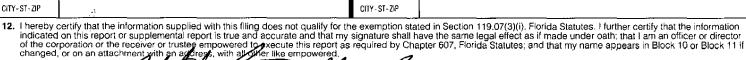
NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Del TITLE NAME

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	CITY-ST-ZIP	



SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

Change

☐ Addition