

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000095033

FILED
Jun 15, 2006
Secretary of State**Entity Name:** TROPICAL PHYSICAL THERAPY CORPORATION**Current Principal Place of Business:**10491 N. KENDALL DRIVE
F-201
MIAMI, FL 33176**New Principal Place of Business:**8290 NW 27 STREET
602
DORAL, FL 33122**Current Mailing Address:**10491 N. KENDALL DRIVE
F-201
MIAMI, FL 33176**New Mailing Address:**8290 NW 27 STREET
602
DORAL, FL 33122**FEI Number:** 65-1046089**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**REGUEIRA, RAMON
10491 N. KENDALL DRIVE
F-201
MIAMI, FL 33176 US**Name and Address of New Registered Agent:**REGUEIRA, RAMON
8290 NW 27 STREET
602
DORAL, FL 33122 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: _____

Electronic Signature of Registered Agent

06/15/2006

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: REGUEIRA, RAMON
Address: 10491 N. KENDALL DRIVE, SUITE F-201
City-St-Zip: MIAMI, FL 33176**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: REGUEIRA, RAMON
Address: 8290 NW 27 STREET, SUITE 602
City-St-Zip: DORAL, FL 33122

I hereby certify that the information supplied with this filing does not qualify for the 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: RAMON REGUEIRA

P

06/15/2006

Electronic Signature of Signing Officer or Director

Date