2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P00000102230**

1. Entity Name

AMERICAN PHYSICAL THERAPY INSTITUTE, INC.



Principal Place of Business

3850 S.W. 87TH AVENUE

SUITE 103

MIAMI, FL 33165

Mailing Address

3850 S.W. 87TH AVENUE

SUITE 103

MIAMI, FL 33165

**FILED** Apr 29, 2005 08:00 AM **Secretary of State** 



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04262005 CR2E034 (10/03) No Chg-P

4. FEI Number 65-1058167

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODDAM, MARIE **3850 SW 87TH AVENUE** #103

MIAMI, FL 33165

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	named entity submits this statement for the pations of registered agent.	nurpose of changing its regis	tered office or re	egistered agent, or bo	oth, in the State of Florida. I am fa	miliar with, and accep
SIGNATURE.						
	Signature, typed or printed name of registered agent and title	if applicable." (NOTE: Regit	stered Agent signature	required when reinstating)	DATE	
	E NOW!!! PEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Fi Trust Fund Contribution		\$5.00 May Be Added to Fees	·	
10.	OFFICER'S AND DIREC					1 1 . The 1 1 E
TITLE	PD			<u></u>		-
NAME	RODDAM, MARIE		1			·
STREET ADDRESS	3850 SW 87TH AVENUE, #103		j · · -	e e	Heritation and arm are	
CITY-ST-ZIP	MIAMI, FL 33165				U00000344543 04/29/05-80141-010	1 150 <b>0</b> 0
TITLE	VD -	* * * * * * * * * * * * * * * * * * * *			an maraa aarir are	2 100.00

NAME RODRIGUEZ, CARLOS E 3850 SW 87TH AVENUE #103 STREET ADDRESS CITY -ST-ZIP MIAMI, FL 33165 VD TITLE RODDAM, MARIE NAME 3850 S.W. 87TH AVENUE SUITE 103 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33165 TITLE STREET ADDRESS CITY ST-ZIP BILE NAME STREET ADDRESS

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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-7IP TITLE

STREET ADDRESS CITY-ST-7IP

Moddam

MARIE RODDAM 4/26/05 (305) 554-8877