

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011374

FILED
Jan 09, 2011
Secretary of State

Entity Name: SENTER FOR HEALTH & REHAB, INC.

Current Principal Place of Business:

2045 N. UNIVERSITY DR
SUNRISE, FL 33322

New Principal Place of Business:

1112 WESTON ROAD #159
WESTON, FL 33326

Current Mailing Address:

1112 WESTON ROAD #159
WESTON, FL 33326

New Mailing Address:

FEI Number: 65-1074061 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SENTER, MINDY B
1112 WESTON ROAD #159
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

Title: D
Name: SENTER, MINDY B
Address: 1112 WESTON ROAD #159
City-St-Zip: WESTON, FL 33326

I hereby 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 all other like empowered.

SIGNATURE: MINDY B SENTER

D

01/09/2011

Electronic Signature of Signing Officer or Director

Date