

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000011822

FILED
Apr 18, 2002 8:00 AM
Secretary of State

Entity Name: SOUTH BROWARD REHABILITATION ASSOCIATES, INC.

Current Principal Place of Business:

3810 SOUTH OCEAN DRIVE
UNIT 3E
HOLLYWOOD, FL 33019

New Principal Place of Business:

16401 NW 2ND AVE
SUITE 204
MIAMI, FL 33169

Current Mailing Address:

3810 SOUTH OCEAN DRIVE
UNIT 3E
HOLLYWOOD, FL 33019

New Mailing Address:

C/O V LERRO & COMPANY
2600 N MILITARY TRAIL, STE 230
BOCA RATON, FL 33431

FEI Number: 65-1071011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GOLDFARB, ZOYA
Address: 3810 SOUTH OCEAN DRIVE UNIT 3E
City-St-Zip: HOLLYWOOD, FL 33019

Title: VTD () Delete
Name: SPIVAK, ILYA
Address: 3810 SOUTH OCEAN DRIVE UNIT 3E
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTD (X) Change () Addition
Name: SPIVAK, ILYA
Address: 3810 SOUTH OCEAN DRIVE UNIT 3E
City-St-Zip: HOLLYWOOD, FL 33019

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ILYA SPIVAK

D

04/18/2002

Electronic Signature of Signing Officer or Director

Date