

2002 UNIFORM BUSINESS REPORT (UBR)

06-03-2002 91194'038'***158.75
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DOCUMENT # P01000039701

1. Entity Name
SOUTH FLORIDA REHAB. SERVICES CORP.

02 OCT -4 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
7801 CORAL WAY
SUITE 132
MIAMI FL 33155

Mailing Address
7801 CORAL WAY
SUITE 132
MIAMI FL 33155



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10689 SW 88th St.

Suite, Apt. #, etc.

#307 SUITE

City & State
MIAMI, FL

Zip
33176

Country

3. Mailing Address

10689 SW 88th St

Suite, Apt. #, etc.

#307 SUITE

City & State
MIAMI, FL

Zip
33176

Country

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JIMENEZ, JUAN E

7801 CORAL WAY

SUITE 132

MIAMI FL 33155

7. Name and Address of New Registered Agent

Name Juan E. Jimenez

Street Address (P.O. Box Number is Not Acceptable)

10689 SW 88th SUITE 307

City MIAMI

FL

Zip Code 33176

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PTD
NAME JIMENEZ, GERARDO I
STREET ADDRESS 7801 CORAL WAY SUITE 132
CITY-ST-ZIP MIAMI FL 33155

TITLE SVD
NAME JIMENEZ, JUAN E
STREET ADDRESS 7801 CORAL WAY SUITE 132
CITY-ST-ZIP MIAMI FL 33155

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Jimenez, Gerardo I
NAME
STREET ADDRESS 10689 SW 88th SUITE 307
CITY-ST-ZIP MIAMI, FL 33176

TITLE Jimenez, Juan E
NAME
STREET ADDRESS 10689 SW 88th SUITE 307
CITY-ST-ZIP MIAMI, FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/27/02 305-595-7158

Date

Daytime Phone #

CR2024 10/01