

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000048917

Entity Name: PRIME QUALITY REHAB, INC.

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

1840 WEST 49 STREET
#304
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 28117
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 65-1111299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOTTER, YOLANDA
16040 E. TROON CIRCLE
HIALEAH, FL 33014 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOTTER, YOLANDA M
Address: 16040 EAST TROON CIRCLE
City-St-Zip: MIAMI LAKES, FL 33014

Title: SVD () Delete
Name: PAINCHAULT, LUIS G
Address: 16040 EAST TROON CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LUIS PAINCHAULT

V.P

04/14/2008

Electronic Signature of Signing Officer or Director

Date