

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091357

FILED
Mar 24, 2009
Secretary of State

Entity Name: BLUE HEAVEN REHABILITATION INC.

Current Principal Place of Business:

2760 SW 97 AVE
SUITE 107
MIAMI, FL 33165

New Principal Place of Business:

4160 W 16 AVE
SUITE 306
HIALEAH, FL 33012

Current Mailing Address:

2760 SW 97 AVE
SUITE 107
MIAMI, FL 33165

New Mailing Address:

4160 W 16 AVE
SUITE 306
HIALEAH, FL 33012

FEI Number: 27-0000775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARONA, JOSE A
10771 SW 96 TER
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

NODARSE, ALFREDO
4160 W 16 AVE
SUITE 306
HIALEAH, FL 33012 US

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: ALFREDO NODARSE

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: VARONA, JOSE A
Address: 10771 SW 96 TER
City-St-Zip: MIAMI, FL 33176

Title: VP () Delete
Name: CORTINA, YAMILKA
Address: 2760 SW 97 AVE. STE 107
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: NODARSE, ALFREDO
Address: 4160 W 16 AVE SUITE 306
City-St-Zip: HIALEAH, FL 33012

Title: VP (X) Change () Addition
Name: CORTINA, YAMILKA
Address: 4160 W 16 AVE SUITE 306
City-St-Zip: HIALEAH, FL 33012

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: ALFREDO NODARSE

PST

03/24/2009

Electronic Signature of Signing Officer or Director

Date