

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101978

FILED
Apr 30, 2004
Secretary of State

Entity Name: LAKEWOOD THERAPY CENTER, INC.

Current Principal Place of Business:

4209 TAMIAMI TRAIL E
NAPLES, FL 34112

New Principal Place of Business:

11500 NW 6 PLACE
PLANTATION, FL 333325

Current Mailing Address:

11500 NW 6TH PLACE
PLANTATION, FL 33325

New Mailing Address:

FEI Number: 59-3754542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIANA, SERGIO
1150 NW 6 PL
FORT LAUDERDALE, FL 33325

Name and Address of New Registered Agent:

TRIANA, SERGIO
11500 NW 6 PL
FORT LAUDERDALE, FL 33325

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: SERGIO TRIANA, D.C.

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TRIANA, SERGIO
Address: 11500 NW 6TH PLACE
City-St-Zip: PLANTATION, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: TRIANA, SERGIO
Address: 11500 NW 6TH PLACE
City-St-Zip: PLANTATION, FL 33325

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: SERGIO TRIANA

DR

04/30/2004

Electronic Signature of Signing Officer or Director

Date