

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000109695

FILED
Feb 20, 2007
Secretary of State

Entity Name: CORAL-MED REHABILITATION INC.

Current Principal Place of Business:

13780 S.W. 26 ST.
STES 104
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

13780 S.W. 26 ST.
STES 104
MIAMI, FL 33175

New Mailing Address:

FEI Number: 61-1405771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORCHES, MANUELA
1500 S.W. 152 PLACE
MIAMI, FL 33194 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: BORCHES, MANUELA
Address: 1500 S.W. 152 PLACE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MANUELA BORCHES

PD

02/20/2007

Electronic Signature of Signing Officer or Director

Date