

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000001102

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** GLOBAL REHAB SERVICES, INC.

**Current Principal Place of Business:**

1150 8TH AVE SW  
LARGO, FL 33770

**New Principal Place of Business:**

10901 CORPORATE CIRCLE N  
STE A  
ST PETERSBURG, FL 33716

**Current Mailing Address:**

10901 CORPORATE CIRCLE N  
SUITE A  
ST PETERSBURG, FL 33716

**New Mailing Address:**

10901 CORPORATE CIRCLE N  
STE A  
ST PETERSBURG, FL 33716

**FEI Number:** 30-0005224

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VOSLOO, LORETTE  
16024 IVY LAKE DRIVE  
ODESSA, FL 33556 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: VOSLOO, LORETTE  
Address: 16024 IVY LAKE DRIVE  
City-St-Zip: ODESSA, FL 33556

I hereby 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 all other like empowered.

SIGNATURE: LORETTE VOSLOO

PSD

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date