2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

1/:

FILED Apr 30, 2003 8:00 am Secretary of State

1. Entity Nam	ne	# PO20 EHABILITATION	CENTER INC.	·						
Principal Place of Business 126 EAST 49TH ST. NALEAH FL 33013			Mailing Address 126 EAST 49TH ST. HIALEAH FL 33013							
2. Principal Place of Business										
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
			City & State			4. FEI Number 02 - 0 - 333 - 4			Applied For Not Applicable	
Zip		Country	Zip	Coun	ntry	5. Certificate of Status 0	Desired	\$8.75 Ad Fee Require]
	6. Name	and Address of Curre	ent Registered Agent		Y	7. Name and Address	of New Registe		-	1
· ·		****			Name					1
LABARCA,	, RAUL				· <u></u>	(P.O. Box Number is Not Ac		·		
126 EAST HIALEAH F	49TH ST. Fl 33013									1
110 022 011					City			FL Zip Cox	de	
	named entity		t for the purpose of changing	its register	ed office or register	red agent, or both, in the St	tate of Florida.	am familiar with	and accept	1
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SIGNATURE .		<u></u>								
	Signature, typed	or printed name of registered ag	<u> </u>	NOTE: Registere	od Agent signeture required	d when reinstating)	0.	ATE		
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quired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if