

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000008883

FILED
Jan 25, 2006
Secretary of State

Entity Name: BEST MEDICAL REHAB INC.

Current Principal Place of Business:

11890 S.W. 8TH ST.
STE. 212
MIAMI, FL 33184

New Principal Place of Business:

Current Mailing Address:

11890 S.W. 8TH ST.
STE. 212
MIAMI, FL 33184

New Mailing Address:

FEI Number: 01-0579386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUEDA, MARIA EUGENIA
11890 S.W. 8TH ST.
STE. 401
MIAMI, FL 33184 US

Name and Address of New Registered Agent:

PALENZUELA, PATRICIA H
11890 S.W. 8TH ST.
STE. 401
MIAMI, FL 33184 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: PATRICIA H. PALENZUELA

01/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: RUEDA, MARIA EUGENIA
Address: 11890 S.W. 8TH ST., STE.401
City-St-Zip: MIAMI, FL 33184

Title: VSD (X) Delete
Name: PALENZUELA, PATRICIA H
Address: 11890 S.W. 8TH ST., STE.401
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: PALENZUELA, PATRICIA H
Address: 11890 S.W. 8TH ST., STE.401
City-St-Zip: MIAMI, FL 33184

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: PATRICIA H. PALENZUELA

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01/25/2006

Electronic Signature of Signing Officer or Director

Date