

PO2000009124

S.F.L. Rehabilitation Facility  
(Requestor's Name)

7941 NW 2ND ST.  
(Address)

MIAMI, FL 33126  
(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

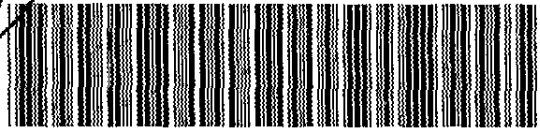
(Business Entity Name)

(Document Number)

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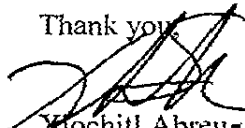
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SOUTH FLORIDA REHABILITATION FACILITY, INC.  
7941 N.W 2<sup>ND</sup> Street  
Miami, Florida 33126

**OFFICER RESIGNATION**

I, Xiochitl Abreu resigned as an Administrator from the above Corporation effective  
June 1, 2004. I am no longer employ by this Corporation.

Thank you

  
Xiochitl Abreu-Souliotis

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