

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033784

Entity Name: PINES REHABILITATION, INC.

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

8100 ROYAL PALM BLVD.
#106
CORAL SPRINGS, FL 33065

New Principal Place of Business:

5617 NW 7TH ST.
1502 14 FLOOR
MIAMI, FL 33126

Current Mailing Address:

8100 ROYAL PALM BLVD.
#106
CORAL SPRINGS, FL 33065

New Mailing Address:

5617 NW 7TH ST
1502 14 FLOOR
MIAMI, FL 33126

FEI Number: 73-1635103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, GLADYS
8100 ROYAL PALM BLVD.
#106
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

HOFFMAN, GLADYS
5617 NW 7TH ST
1502 14 FLOOR
MIAMI, FL 33126 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: _____

Electronic Signature of Registered Agent

05/02/2007

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PIERCE, THOMAS
Address: 8100 ROYAL PALM BLVD. #106
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VPD () Delete
Name: HOFFMAN, GLADYS
Address: 8100 ROYAL PALM BLVD. #106
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PIERCE, THOMAS
Address: 5617 NW 7TH ST
City-St-Zip: # 1502 14 FLOOR, FL 33126

Title: VPD (X) Change () Addition
Name: HOFFMAN, GLADYS
Address: 5617 NW 7TH ST
City-St-Zip: # 1502 14 FLOOR, FL 33126

I hereby certify that the information supplied with this filing does not qualify 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: HOFFMAN GLADYS

Electronic Signature of Signing Officer or Director

VPD

05/02/2007

Date