

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034057

FILED
Jan 21, 2005
Secretary of State

Entity Name: I & J REHABILITATION CENTER, INC.

Current Principal Place of Business:

2851 W 68 STREET
SUITE 7
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

2851 W 68 STREET
SUITE 7
HIALEAH, FL 33018

New Mailing Address:

FEI Number: 03-0421935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARMIENTO, JAIME
2851 W 68 STREET
SUITE 7
HIALEAH, FL 33018 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: SARMIENTO, JAIME A
Address: 12850 SW 50 CT
City-St-Zip: MIRAMAR, FL 33027

Title: P () Delete
Name: SARMIENTO, JAIME
Address: 2851 W 68 STREET, SUITE 7
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Section 119.07(3)(i), 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: JAIME SARMIENTO

P

01/21/2005

Electronic Signature of Signing Officer or Director

Date