2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004
Secretary of State

DOCUMENT# P02000081914

Entity Name: BEST PHYSICAL REHAB, INC.

Current Principal Place of Business:

1080 NW 15TH STREET
BOCA RATON, FL 33486

New Principal Place of Business:

8192 GLADES RD
BOCA RATON, FL 33434

Current Mailing Address:

765 BAMBOO DRIVE
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 56-2286720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, FRONA S OWNER
765 BAMBOO DRIVE
BOCA RATON, FL 33432

Name and Address of New Registered Agent:

ROSS, GREG
311 SE 10TH
BOCA RATON, FL 33434

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: GREG ROSS 01/08/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROSS, FRANA
Address: 765 BAMBOO DRIVE
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROSS, FRONA
Address: 765 BAMBOO DRIVE
City-St-Zip: BOCA RATON, FL 33432

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: FRONA ROSS P 01/08/2004
Electronic Signature of Signing Officer or Director Date