

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096742

FILED
Jan 16, 2004
Secretary of State

Entity Name: COMPLETE REHAB SERVICES, INC.

Current Principal Place of Business:

1500 N DIXIE HWY #205
WEST PALM BEACH, FL 33401

New Principal Place of Business:

1499 FOREST HILL BLVD.
110
LAKE CLARKE SHORES, FL 33406

Current Mailing Address:

1500 N DIXIE HWY #205
WEST PALM BEACH, FL 33401

New Mailing Address:

1499 FOREST HILL BLVD.
110
LAKE CLARKE SHORES, FL 33406

FEI Number: 22-3870660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISHAK, EMAD
1500 N DIXIE HWY #205
WEST PALM BEACH, FL 33401

Name and Address of New Registered Agent:

GREENHALGH, TERRY
1499 FOREST HILL BLVD.
110
LAKE CLARKE SHORES, FL 33406

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: TERRY GREENHALGH

01/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: OSHAK, EMAD
Address: 10288 HUNT CLUB LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: P () Delete
Name: HABIB, BAHAR
Address: 7491 RIDGEFIELD LANE
City-St-Zip: LAKE WORTH, FL 33467

Title: V (X) Delete
Name: SCHOTT, ROBERT A JR
Address: 4371 EMPRESS ST.
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GREENHALGH, TERRY
Address: 1499 FOREST HILL BLVD. STE. 110
City-St-Zip: LAKE CLARKE SHORES, FL 33406

Title: DT (X) Change () Addition
Name: NASSIF, AMAL
Address: 1499 FOREST HILL BLVD. STE. 110
City-St-Zip: LAKE CLARKE SHORES, FL 33406

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: TERRY GREENHALGH

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01/16/2004

Electronic Signature of Signing Officer or Director

Date