

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096742

FILED
Jan 29, 2008
Secretary of State

Entity Name: COMPLETE REHAB SERVICES, INC.

Current Principal Place of Business:

1210 S FEDERAL HWY
102
BOYNTON BEACH, FL 33435

Current Mailing Address:

1210 S FEDERAL HWY
102
BOYNTON BEACH, FL 33435

New Principal Place of Business:

1210 S FEDERAL HWY
202
BOYNTON BEACH, FL 33435

New Mailing Address:

1210 S FEDERAL HWY
202
BOYNTON BEACH, FL 33435

FEI Number: 22-3870660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENHALGH, TERRY
1210 S FEDERAL HWY
102
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

GREENHALGH, TERRY
1210 S FEDERAL HWY
202
BOYNTON BEACH, FL 33435 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:

01/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GREENHALGH, TERRY
Address: 7491 RIDGEFIELD LANE
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST () Change (X) Addition
Name: ISHAK, EMAD
Address: 10288 HUNT CLUB LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGR () Change (X) Addition
Name: HABIB, BAHAR
Address: 7491 RIDGEFIELD LANE
City-St-Zip: LAKE WORTH, FL 33467

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: TERRY GREENHALGH

DP

01/29/2008

Electronic Signature of Signing Officer or Director

Date