

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000102931

FILED  
Apr 08, 2005  
Secretary of State

Entity Name: PER4MANCE REHABILITATION & CONSULTING, INC.

## Current Principal Place of Business:

4532 W. KENNEDY BLVD  
SUITE 287  
TAMPA, FL 33609 US

## Current Mailing Address:

4532 W. KENNEDY BLVD  
SUITE 287  
TAMPA, FL 33609 US

## New Principal Place of Business:

100 N. FEDERAL HWY.  
#921  
FT. LAUDERDALE, FL 33301 US

## New Mailing Address:

100 N. FEDERAL HWY.  
#921  
FT. LAUDERDALE, FL 33301 US

FEI Number: 51-0430216

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
78 COLUMBIA DRIVE  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.  
3000 W. KENNEDY BLVD.  
TAMPA, FL 33609 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:

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DEANE, DANIEL  
Address: 4532 W. KENNEDY BLVD SUITE 287  
City-St-Zip: TAMPA, FL 33609

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DEANE, DANIEL D  
Address: 100 N. FEDERAL HWY. #921  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VP ( ) Change (X) Addition  
Name: DEANE, ARTHUR D  
Address: 193 S. OCEAN DR.  
City-St-Zip: OCEAN CITY, MD 20138

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: DANIEL D. DEANE

PD

04/08/2005

Electronic Signature of Signing Officer or Director

Date