

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000123342

FILED  
Mar 18, 2008  
Secretary of State

**Entity Name:** OCCUPATIONAL FLEX REHABILITATION CENTER, INC.

**Current Principal Place of Business:**

3270 NW 36 STREET  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

3270 NW 36 STREET  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 02-0689883

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEARR, CRAIG R  
TWO DATRAN CENTER SUITE 1609  
9130 S DADELAND BLVD  
MIAMI, FL 33156 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: D ( ) Delete  
Name: ADERMAN, DONNA  
Address: 3270 NW 36 STREET  
City-St-Zip: MIAMI, FL 33142

Title: D ( ) Delete  
Name: ADERMAN, RANDALL  
Address: 3270 NW 36 STREET  
City-St-Zip: MIAMI, FL 33142

Title: D ( ) Delete  
Name: LLOYD, CLAUDIA  
Address: 3270 NW 36 ST  
City-St-Zip: MIAMI, FL 33142

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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:** RANDALL ADERMAN

D

03/18/2008

Electronic Signature of Signing Officer or Director

Date