2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# P02000123342

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:

ADERMAN, RANDALL
3270 NW 36 STREET
MIAMI, FL 33142 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

OFFICERS AND DIRECTORS:

Title: D
Name: ADERMAN, DONNA
Address: 3270 NW 36 STREET
City-St-Zip: MIAMI, FL 33142

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

I hereby 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 all other like empowered.

SIGNATURE: RANDALL M. ADERMAN DIR 02/16/2011

Electronic Signature of Signing Officer or Director Date