## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025819

Entity Name: TAMPA BAY MEDICAL REHAB INC.

FILED Apr 28, 2011 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 

6800 N. DALE MABRY HWY 6408 N ARMENIA AVE STE 1-A TAMPA, FL 33604

SUITE 198-B TAMPA, FL 33614

**Current Mailing Address: New Mailing Address:** 

6408 N ARMENIA AVE STE 1-A 6800 N. DALE MABRY HWY TAMPA, FL 33604

SUITE 198-B TAMPA, FL 33614

FEI Number: 84-1617540 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AMARO, YUSDANIA AMARO, YUSDANIA 6408 N. ARMENIA AVE SUITE 1-A 6800 N. DALE MABRY HWY TAMPA, FL 33604 SUITE 198-B

TAMPA, FL 33614 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: 04/28/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

AMARO, YUSDANIA Name: 6800 N. DALE MABRY HWY Address: City-St-Zip: TAMPA, FL 33614

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.

Ρ SIGNATURE: YUSDANIA AMARO 04/28/2011