2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048698

Entity Name: FOCUSED REHABILITATION, INC.

FILED Apr 27, 2005 Secretary of State

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

5692 BENTGRASS DR #102 1690 SWEETLAND ST SARASOTA, FL 34235 US NOKOMIS, FL 34275 US

Current Mailing Address: New Mailing Address:

5692 BENTGRASS DR #102 1690 SWEETLAND ST SARASOTA, FL 34235 US NOKOMIS, FL 34275 US

FEI Number: 90-0086185 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:

TRIBIT, KENNETH I
5692 BENTGRASS DR #102
SARASOTA, FL 34235
US
TRIBIT, KENNETH I
1690 SWEETLAND ST
NOKOMIS, FL 34275
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: 04/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 TRIBIT, KENNETH I
 Name:
 TRIBIT, KENNETH I

 Address:
 5692 BENTGRASS DR. #102
 Address:
 1690 SWEETLAND ST

 City-St-Zip:
 SARASOTA, FL 34235
 City-St-Zip:
 NOKOMIS, FL 34275

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: KENNETH I. TRIBIT PRES 04/27/2005