

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000090958

FILED
Apr 02, 2005
Secretary of State

Entity Name: A.B.C. PEDRIATIC REHAB SERVICES, INC.

Current Principal Place of Business:

2639 PARSLEY DR
ORLANDO, FL 328376740

New Principal Place of Business:

7640 COUNTRY RUN PKWY
ORLANDO, FL 32818

Current Mailing Address:

2639 PARSLEY DR
ORLANDO, FL 328376740

New Mailing Address:

7640 COUNTRY RUN PKWY
ORLANDO, FL 32818

FEI Number: 81-0629550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOGEL, KENNETH
2639 PARSLEY DR
ORLANDO, FL 328376740 US

Name and Address of New Registered Agent:

VOGEL, KENNETH
2115 CASSIA CIR #1
KISSIMMEE, FL 34741 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: KENNETH VOGEL

04/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VOGEL, KENNETH
Address: 2639 PARSLEY DR
City-St-Zip: ORLANDO, FL 328376740

Title: DV () Delete
Name: VOGEL, ADRIANA P
Address: 2639 PARSLEY DR
City-St-Zip: ORLANDO, FL 328376740

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VOGEL, KENNETH
Address: 2115 CASSIA CIR #1
City-St-Zip: KISSIMMEE, FL 34741

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

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 VOGEL

DP

04/02/2005

Electronic Signature of Signing Officer or Director

Date