2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096963

Entity Name: GAMA REHAB. SERVICES, INC.

FILED Apr 21, 2010 Secretary of State

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

19042 NW 91ST CT MIAMI, FL 33018

Current Mailing Address: New Mailing Address:

19042 NW 91ST CT MIAMI, FL 33018

FEI Number: 20-0203443 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:

MENDOZA, GILBERTO O 19042 NW 91ST CT MIAMI, FL 33018 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P1

Name: MENDOZA, LUZ M Address: 19042 NW 91ST CT City-St-Zip: MIAMI, FL 33018

Title: VS

Name: MENDOZA, GILBERTO O Address: 19042 NW 91ST CT City-St-Zip: MIAMI, FL 33018

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: GILBERTO MENDOZA V 04/21/2010