## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000105433

**Current Principal Place of Business:** 

Entity Name: P & G MEDICAL REHAB CENTER INC.

FILED Jan 16, 2010 Secretary of State

FEI Number: 20-0303684	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
8401 BARRETT PLACE TAMPA, FL 33617			
Current Mailing Address	:	New Mailing Address:	
2901 W. BUSH BLVD. SUITE 801 TAMPA, FL 33618			

**New Principal Place of Business:** 

Name and Address of New Registered Agent:

PUJOLS, JOSE 8401 BARRETT PLACE TAMPA, FL 33617 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 ( ).

Name and Address of Current Registered Agent:

## **OFFICERS AND DIRECTORS:**

Title:

Name: PUJOLS, JOSE
Address: 8401 BARRETT PLACE
City-St-Zip: TAMPA, FL 33617

Title: [

Name: MIRANDA, LUIS Address: 3105 MAGNOLIA CT City-St-Zip: TAMPA, FL 33618

Title: VP

Name: NUNEZ, BELKIS A
Address: 8401 BARRETT PLACE
City-St-Zip: TAMPA, FL 33617

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: JOSE PUJOLS OWNE 01/16/2010