

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004 8:00 am
Secretary of State

07-07-2004 90003 034 ***150.00

DOCUMENT # P03000131527

1. Entity Name
REHABILITATE & RESTORE MASSAGE INC.



Principal Place of Business
5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 US

Mailing Address
5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 US

54060167



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07012004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
20-0399858

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HALL, CYNTHIA
5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
HALL, CYNTHIA
5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cynthia Hall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/04
Date

(561) 252-2673
Daytime Phone #

Attachment - P03000131527

574060167

REHABILITATE & RESTORE MASSAGE, INC.
5150 Conklin Drive
Delray Beach, FL 33484

July 2, 2004

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Re: Document #P03000131527

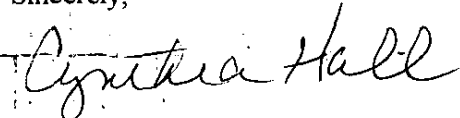
To Whom it Concerns:

Per my conversation with your representative this date, this notice is to inform you that no prior notice of Annual Report filing was received by this corporation.

The representative's instruction to me was to attach this letter with the downloaded form from your website and my check for \$150.00 for the 2004 filing.

Please contact me at (561) 252-2673 or at the above address if you have any questions.
Thank you for your assistance.

Sincerely,



Cynthia Hall, Director
Rehabilitate & Restore Massage, Inc.

/ch

enclosures



Attachment - P03000131527
Division of Corporations

54060167

2004 Annual Report

**Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.**

This information cannot be changed on the report.	
Document Number	P03000131527
Business Entity Name	REHABILITATE & RESTORE MASSAGE INC.
Original File Date	11/13/2003

FEI Number

Principal Address 5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 US

Mailing Address 5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 US

Registered Agent CYNTHIA HALL
5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 US

Officer/Director Name And Address

DIR
CYNTHIA HALL
5150 CONKLIN DRIVE
DELRAY BEACH, FL 33484 US

☒ After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

Continue

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