

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133436

**FILED**  
**Mar 24, 2005**  
**Secretary of State**

**Entity Name:** FLORIDA HEALTH, REHAB., AND ASSOCIATES, INC.

**Current Principal Place of Business:**

15038 NE 6 AVE  
N MIAMI BCH, FL 33161

**New Principal Place of Business:**

2775 NE 163RD AVENUE  
SUITE 150  
N MIAMI BCH, FL 33160

**Current Mailing Address:**

15038 NE 6 AVE  
N MIAMI BCH, FL 33161

**New Mailing Address:**

2775 NE 163RD AVE  
SUITE 150  
N MIAMI BCH, FL 33160

**FEI Number:** 20-0896736

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEINSTEIN, GARRETT  
21396 MARINA COVE CIR J-16  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

WEINSTEIN, GARRETT  
10865 BLUE PALM STREET  
PLANTATION, FL 33324 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:** GARRETT WEINSTEIN

03/24/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PRES ( ) Delete  
**Name:** WEINSTEIN, GARRETT R PRESIDE  
**Address:** 21396 MARINA COVE CIR. #J-16  
**City-St-Zip:** AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PRES (X) Change ( ) Addition  
**Name:** WEINSTEIN, GARRETT R PRESIDE  
**Address:** 10865 BLUE PALM STREET  
**City-St-Zip:** PLANTATION, FL 33324

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:** GARRETT WEINSTEIN

PRES

03/24/2005

Electronic Signature of Signing Officer or Director

Date