2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 14, 2011
Secretary of State

DOCUMENT# P03000152615

Entity Name: SEABREEZE PHYSICAL THERAPY ,INC.

Current Principal Place of Business:

419 S PASADENA AVE
ST PETERSBURG, FL 33707

New Principal Place of Business:

419 S PASADENA AVE
ST PETERSBURG, FL 33707 US

Current Mailing Address:

419 S PASADENA AVE
ST PETERSBURG, FL 33707

New Mailing Address:

419 S PASADENA AVE
ST PETERSBURG, FL 33707 US

FEI Number: 20-0505425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRINQUE, STEPHEN J
419 S PASADENA AVE
ST PETERSBURG, FL 33707 US

Name and Address of New Registered Agent:

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: STEPHEN TRINQUE
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: TRINQUE, STEPHEN J
Address: 419 S PASADENA AVE
City-St-Zip: ST PETERSBURG, FL 33707 US

Title: V
Name: TRINQUE, PATRICIA A
Address: 419 S PASADENA AVE
City-St-Zip: ST PETERSBURG, FL 33707 US

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: STEPHEN TRINQUE PRES 03/14/2011
Electronic Signature of Signing Officer or Director Date