2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010081

Entity Name: REHAB MEDICAL BILLING SERVICES, INC.

FILED Mar 07, 2011 Secretary of State

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Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
1085 KANE CONCOURS BAY HARBOR, FL 3315				
Current Mailing Address:		New Mailing Address:		
1085 KANE CONCOURS BAY HARBOR, FL 3315				
FEI Number: 75-3143277	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:				
MARCUS, ALAN J ESQ 20803 BISCAYNE BLVD AVENTURA, FL 33180				
The above named entity : in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electror	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIREC	TORS:			

Title:

Name: WITTELS, MICHAEL
Address: % 1085 KANE CONCOURSE
City-St-Zip: BAY HARBOR, FL 33154

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: MICHAEL WITTELS D 03/07/2011