

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012017

FILED
Jan 03, 2012
Secretary of State

Entity Name: FLAGLER REHAB CENTER INC.

Current Principal Place of Business:

4343 W FLAGLER ST
SUITE 501
MIAMI, FL 33134 US

New Principal Place of Business:

4343 W FLAGLER ST
SUITE 503
MIAMI, FL 33134 US

Current Mailing Address:

4343 W FLAGLER ST
SUITE 501
MIAMI, FL 33134 US

New Mailing Address:

4343 W FLAGLER ST
SUITE 503
MIAMI, FL 33134 US

FEI Number: 20-0611466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORELL, ALAIN
4343 W FLAGLER ST
SUITE 501
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

MORELL, ALAIN
4343 W FLAGLER ST
SUITE 503
MIAMI, FL 33134 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:

01/03/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PS
Name: MORELL, ALAIN
Address: 4343 W FLAGLER ST, SUITE 503
City-St-Zip: MIAMI, FL 33134 US

Title: VP
Name: MORELL, ARACELYS
Address: 4343 W FLAGLER ST, SUITE 503
City-St-Zip: MIAMI, FL 33134 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: ALAIN MORELL

PS

01/03/2012

Electronic Signature of Signing Officer or Director

Date