

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059365

FILED
Apr 29, 2005
Secretary of State

Entity Name: PROCARE REHABILITATIVE SERVICES, INC.

Current Principal Place of Business:

1613 NORTH HIATUS ROAD
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

1613 NORTH HIATUS ROAD
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALATAK, MARK A CPA
1489 NORTHWEST 126 WAY
SUITE #200
SUNRISE, FL 333233195 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLMAN, GRACE
Address: 20762 NW THIRD COURT
City-St-Zip: PEMBROKE PINES, FL 330293520

Title: D () Delete
Name: WILKINSON, ALISIA
Address: 13243 NW 8 COURT
City-St-Zip: PEMBROKE PINES, FL 330283138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WILKINSON, ALSIA
Address: 13243 NW 8 COURT
City-St-Zip: PEMBROKE PINES, FL 330283138

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: ALSIA WILKINSON

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date