

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000118564

FILED
Jun 27, 2006
Secretary of State

Entity Name: REHAB STARS OF DADE COUNTY, INC.

Current Principal Place of Business:

741 NW 195TH STREET
741
NORTH MIAMI BEACH, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

741 NW 195TH STREET
741
NORTH MIAMI BEACH, FL 33179 US

New Mailing Address:

FEI Number: 20-1491001 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DANNELLY & COMPANY, P.A.
2717 WEST CYPRES CREEK ROAD
FORT LAUDERDALE, FL FL US

Name and Address of New Registered Agent:

DANNELLY + COMPANY, PA
2717 W CYPRESS CREEK ROAD
FT LAUDERDALE, FL FL 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: SEAN DANNELLY

06/27/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALKER, ROBIN K
Address: 741 NE 195TH STREET, UNIT 741
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBIN WALKER

PD

06/27/2006

Electronic Signature of Signing Officer or Director

Date