2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000125960

Entity Name: PALM MEDICAL REHAB, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

258 EAST 49 STREET 434 SW 12 AVE HIALEAH, FL 33013

206

MIAMI, FL 33130

Current Mailing Address: New Mailing Address:

258 EAST 49 STREET 434 SW 12 AVE 206

HIALEAH, FL 33013

MIAMI, FL 33130

FEI Number: 81-0655163 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:

HERRERA, ARMANDO HERRERA, MARGARITA 25 EAST 53RD TERRACE 5701 COLLINS AVE

HIALEAH, FL 33013 301 MIAMI BEACH, FL 33140 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: MARGARITA HERRERA 04/01/2009

> Date Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HERRERA, ARMANDO HERRERA, MARGARITA Name: Name: 25 EAST 53RD TERRACE Address: 5701 COLLINS AVE APT 301 Address: City-St-Zip: HIALEAH, FL 33013 City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: MARGARITA HERRERA 04/01/2009