

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000005566

Entity Name: MARGATE REHAB CENTER, INC.

FILED  
Jan 17, 2006  
Secretary of State

## Current Principal Place of Business:

4900 W. ATLANTIC BLVD.  
4  
MARGATE, FL 33064 US

## Current Mailing Address:

4900 W. ATLANTIC BLVD.  
4  
MARGATE, FL 33064 US

## New Principal Place of Business:

4900 W. ATLANTIC BLVD.  
6  
MARGATE, FL 33063 US

## New Mailing Address:

4900 W. ATLANTIC BLVD.  
6  
MARGATE, FL 33063 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCON, GREGOIRE DR.  
4900 W. ATLANTIC BLVD.  
4  
MARGATE, FL 33064 US

## Name and Address of New Registered Agent:

GARCON, GREGOIRE DR.  
4900 W. ATLANTIC BLVD.  
6  
MARGATE, FL 33063 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: GARCON GREGOIRE

01/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GARCON, GREGOIRE DR.  
Address: 4900 W. ATLANTIC BLVD. #4  
City-St-Zip: MARGATE, FL 33064 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GARCON, GREGOIRE DR.  
Address: 4900 W. ATLANTIC BLVD. #6  
City-St-Zip: MARGATE, FL 33063 US

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: DR. GARCON GREGOIRE

P

01/17/2006

Electronic Signature of Signing Officer or Director

Date