2013 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 02, 2013
Secretary of State

DOCUMENT# P05000040812

Entity Name: PRIME MEDICAL & REHAB SERVICES, INC.

Current Principal Place of Business:

23 ALMEIDA AVE., SUITE 4
CORAL GABLES, FL 33134

New Principal Place of Business:

23 ALMEIDA AVE
SUITE 4
CORAL GABLES, FL 33134

Current Mailing Address:

23 ALMEIDA AVE., SUITE 4
CORAL GABLES, FL 33134

New Mailing Address:

23 ALMEIDA AVE
SUITE 4
CORAL GABLES, FL 33134

FEI Number: 20-2537954 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HURTADO, DIANA L
23 ALMEIDA AVE., SUITE 4
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

HURTADO, DIANA L
23 ALMEIDA AVE
SUITE 4
CORAL GABLES, 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: DIANA HURTADO 10/02/2013
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: HURTADO, DIANA L
Address: 23 ALMEIDA AVE., SUITE 4
City-St-Zip: CORAL GABLES, FL 33134

Title: VP
Name: CUNILL, RICHET L
Address: 23 ALMEIDA AVE, SUITE 4
City-St-Zip: CORAL GABLES, FL 33134

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: RICHET CUNILL VP 10/02/2013
Electronic Signature of Signing Officer or Director Date