

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000044058

FILED
Feb 17, 2010
Secretary of State

Entity Name: MAGICAL REHAB CENTER INC.

Current Principal Place of Business:

8890 CORAL WAY
209
MIAMI, FL 33165

New Principal Place of Business:

8350 SW 8 STREET
MIAMI, FL 33144 US

Current Mailing Address:

8890 CORAL WAY
209
MIAMI, FL 33165

New Mailing Address:

8350 SW 8 STREET
MIAMI, FL 33144 US

FEI Number: 25-1919796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, ZUYIN
3543 SW 91 AVENUE
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

RIO, LINDA
8350 SW 8 STREET
MIAMI, FL 33144 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: LINDA RIO

02/17/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: PEREZ, ZUYIN
Address: 3543 SW 91 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: VP
Name: RIO, LINDA
Address: 8350 SW 8 STREET
City-St-Zip: MIAMI, FL 33144

Title: S
Name: RIO, LINDA
Address: 8350 SW 8 STREET
City-St-Zip: MIAMI, FL 33144 US

Title: TR
Name: RIO, LINDA
Address: 8350 SW 8 STREET
City-St-Zip: MIAMI, FL 33144 US

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: LINDA RIO

VP

02/17/2010

Electronic Signature of Signing Officer or Director

Date