

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046311

FILED
Jun 26, 2012
Secretary of State

Entity Name: HILLSBOROUGH CARE REHAB CENTERS, INC

Current Principal Place of Business:

5811 MEMORIAL HWY
TAMPA, FL 33615

New Principal Place of Business:

5811 MEMORIAL HWY
106
TAMPA, FL 33615

Current Mailing Address:

5811 MEMORIAL HWY
TAMPA, FL 33615

New Mailing Address:

5811 MEMORIAL HWY
106
TAMPA, FL 33615

FEI Number: 20-2588958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, RUBEN
8486 W HILLSBOROUGH AVE
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

GONZALEZ, RUBEN
5811 MEMORIAL HWY
106
TAMPA, FL 33615 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: RUBEN GONZALEZ

06/26/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GONZALEZ, RUBEN
Address: 5811 MEMORIAL HWY SUITE 106
City-St-Zip: TAMPA, FL 33615

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: RUBEN GONZALEZ

P

06/26/2012

Electronic Signature of Signing Officer or Director

Date