2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2006
Secretary of State

DOCUMENT# P05000048743

Entity Name: TAYLOR MEDICAL REHAB CORP

Current Principal Place of Business:

1883 W FLAGLER ST SUITE 3
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1883 W FLAGLER ST SUITE 3
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-2691538 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGUSTIN, YULEMA
1883 W FLAGLER ST SUITE 3
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

PADRON, BEATRIZ
1883 W FLAGLER ST SUITE 3
MIAMI, FL 33135 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: BEATRIZ PADRON 07/31/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: AGUSTIN, YULEMA
Address: 1883 W FLAGLER ST SUITE 3
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PADRON, BEATRIZ
Address: 1883 W FLAGLER ST SUITE 3
City-St-Zip: MIAMI, FL 33135

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: BEATRIZ PADRON P 07/31/2006
Electronic Signature of Signing Officer or Director Date