

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049594

FILED  
Jun 14, 2012  
Secretary of State

**Entity Name:** SYSTEMS & STRUCTURE REHAB CENTER INC

**Current Principal Place of Business:**

49 WEST 3RD STREET.  
HIALEAH, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

49 WEST 3RD STREET  
HIALEAH, FL 33010

**New Mailing Address:**

FEI Number: 20-2622927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CASTELLANOS, ODALIS  
1 US 27 HWY SOUTH  
VENUS, FL 33960 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: CASTELLANOS, ODALIS  
Address: 1 US 27 HWY SOUTH  
City-St-Zip: VENUS, FL 33960

Title: VP,S  
Name: NEYRA, ANGEL A  
Address: 1 US 27 HWY SOUTH  
City-St-Zip: VENUS, FL 33960

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: ODALIS CASTELLANOS

P,S

06/14/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date