

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000064528

FILED
May 01, 2006
Secretary of State

Entity Name: ROYAL OUTPATIENT REHABILITATION CENTER, INC.

Current Principal Place of Business:

9600 S.W. 8TH STREET, #24-25
MIAMI, FL 33174

New Principal Place of Business:

9600 S.W. 8TH STREET
24-25
MIAMI, FL 33174

Current Mailing Address:

9600 S.W. 8TH STREET, #24-25
MIAMI, FL 33174

New Mailing Address:

9600 S.W. 8TH STREET,
24-25
MIAMI, FL 33174

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RAMOS, ELEIDY
11538 S.W. 171 STREET
MIAMI, FL 33157 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: RAMOS, ELEIDY
Address: 10300 SW 72 ST #325
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GERMAN PENA

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05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date