2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2012
Secretary of State

DOCUMENT# P05000073939

Entity Name: PALMETTO WEST REHABILITATION CENTER, INC.

Current Principal Place of Business:

6955 NW 77 AVE
303
MIAMI, FL 33166 US

New Principal Place of Business:

3310 SW 190TH AVE
MIAMI, FL 33029 US

Current Mailing Address:

6955 NW 77 AVE
303
MIAMI, FL 33166 US

New Mailing Address:

3310 SW 190TH AVE
MIAMI, FL 33029 US

FEI Number: 20-2923068 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARKASS, TOMAS
6955 NW 77 AVE
303
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

FARKASS, TOMAS
3310 SW 190TH AVE
MIAMI, FL 33029 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: _____ 03/06/2012

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: FARKASS, TOMAS
Address: 3310 SW 190TH AVE
City-St-Zip: MIAMI, FL 33029 US

Title: VP
Name: ECHEVERRIA, FERNANDO
Address: 2471 EAGLE RUN DR.
City-St-Zip: WESTON, FL 33327 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: TOMAS FARKASS P 03/06/2012

Electronic Signature of Signing Officer or Director — Date