

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000077759

FILED
Nov 25, 2008
Secretary of State

Entity Name: LORD'S MEDICAL & REHAB CENTER INC.

Current Principal Place of Business:

1800 SW 1ST STREET
SUITE #317
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1800 SW 1ST STREET
SUITE #317
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-4747348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REVUELTA, MERCEDES
7001 W 35 AVE #172
HOLLYWOOD, FL 33018 US

Name and Address of New Registered Agent:

REVUELTA, MERCEDES
7001 W 35 AVE #172
HIALEAH, FL 33018 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: MERCEDES REVUELTA

11/25/2008

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: PD () Delete
Name: REVUELTA, MERCEDES
Address: 7001 W 35 AVE #172
City-St-Zip: HOLLYWOOD, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REVUELTA, MERCEDES
Address: 7001 W 35 AVE #172
City-St-Zip: HIALEAH, FL 33018

I hereby certify that the information supplied with this filing does not qualify 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: MERCEDES REVUELTA

PD

11/25/2008

Electronic Signature of Signing Officer or Director

Date