2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2011
Secretary of State

DOCUMENT# P05000104211

Entity Name: ALL-STATE REHAB CENTER INC.

Current Principal Place of Business:

4800 WEST FLAGLER ST.
212
CORAL GABLES, FL 33134

New Principal Place of Business:

4800 WEST FLAGLER STREET
212
CORAL GABLES, FL 33134

Current Mailing Address:

4800 WEST FLAGLER ST.
212
CORAL GABLES, FL 33134

New Mailing Address:

4800 WEST FLAGLER STREET
212
CORAL GABLES, FL 33134

FEI Number: 33-1121939 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, ESTRELLA
4481 SW 1 STREET
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GARCIA, AURELIO J
4800 WEST FLAGLER STREET
212
CORAL GABLES, FL 33134 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: AURELIO J GARCIA 01/30/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD
Name: GARCIA, AURELIO J
Address: 4800 WEST FLAGLER STREET
City-St-Zip: CORAL GABLES, FL 33134

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: AURELIO J GARCIA P 01/30/2011
Electronic Signature of Signing Officer or Director Date