

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123347

FILED
Apr 10, 2007
Secretary of State

Entity Name: FIRST CARE PHYSICAL THERAPY, INC.

Current Principal Place of Business:

9563 SOUTH DIXIE HWY
MIAMI, FL 33156

New Principal Place of Business:

9492 SOUTH DIXIE HWY
MIAMI, FL 33156

Current Mailing Address:

3500 CORAL WAY
#604
MIAMI, FL 33156

New Mailing Address:

FEI Number: 20-4755969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ALEXIS
9755 SW 40TH TERRACE
MIAMI, FL 33165 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YACOUB, RONALD R
Address: 9563 SOUTH DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33156 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: YACOUB, RONALD R
Address: 9492 SOUTH DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33156 US

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: RON YACOUB

P

04/10/2007

Electronic Signature of Signing Officer or Director

Date