

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000126731

**FILED
Oct 26, 2010
Secretary of State**

Entity Name: NEW LIFE REHAB MEDICAL CENTER INC

Current Principal Place of Business:

1560 WEST 37TH STREET
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1560 WEST 37TH STREET
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 20-3474221 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JUAN, ALEXANDER
1560 WEST 37TH STREET
HIALEAH, FL 33012 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: JORGE CABALLERO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: JUAN, ALEXANDER
Address: 1560 WEST 37TH STREET
City-St-Zip: HIALEAH, FL 33012

Title: V
Name: CABALLERO, JORGE
Address: 1560 WEST 37TH STREET
City-St-Zip: HIALEAH, FL 33012

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: JORGE CABALLERO

Electronic Signature of Signing Officer or Director

OWNE

10/26/2010

Date