2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155058

Entity Name: BEST FLORIDA REHABILITATION CENTER, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7875 NW 12 ST 7875 NW 12 ST STE 104 STE 104

MIAMI, FL 33126 US

Current Mailing Address: New Mailing Address:

7875 NW 12 ST 7875 NW 12 ST STE 104 STE 104

MIAMI, FL 33126 MIAMI, FL 33126 US

FEI Number: 02-0761328 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NUNEZ, MADELAINE C. S 7875 NW 12 ST STE 104 MIAMI, FL 33126 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition

 Name:
 NUNEZ, MADELINE C. S
 Name:
 NUNEZ, MADELINE C. S

 Address:
 7875 NW 12 ST, STE. 104
 Address:
 7875 NW 12 ST, STE. 104

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33126 US

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: MADELAINE S NUNEZ PSD 04/28/2008