2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jan 31, 2007
Secretary of State

DOCUMENT# P06000005638

Entity Name: REHABILITATIVE TREATMENT FACILITY, INC.

Current Principal Place of Business:

11180 W FLAGLER ST.
10
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

11180 W FLAGLER ST.
10
MIAMI, FL 33174

New Mailing Address:

FEI Number: 81-0680578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAPATA, ANDRES
11180 W FLAGLER ST.
10
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

FERNANDEZ, ENEDYS M
11180 W FLAGLER ST.
10
MIAMI, FL 33174 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: ENEDYS M FERNANDEZ 01/31/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete
Name: ZAPATA, ANDRES
Address: 11180 W FLAGLER ST, STE. 10
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition
Name: FERNANDEZ, ENEDYS M
Address: 11180 W FLAGLER ST, STE. 10
City-St-Zip: MIAMI, FL 33174

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: ENEDYS M FERNANDEZ PDTE 01/31/2007
Electronic Signature of Signing Officer or Director Date