

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000050966

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** CAMPOS PHYSICAL THERAPY, INC.

**Current Principal Place of Business:**

12900 SW 100TH AVE.  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

12900 SW 100TH AVE.  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 20-4667175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAMPOS, EDGAR  
12900 SW 100TH AVE.  
MIAMI, FL 33176 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CAMPOS, EDGAR  
Address: 12900 SW 100TH AVE.  
City-St-Zip: MIAMI, FL 33176

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: EDGAR CAMPOS

PRES

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date