2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# P06000075882

Entity Name: GARDENS REHAB & SPORTS MEDICINE, INC.

Current Principal Place of Business:

10298 HUNT CLUB LN.
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

10298 HUNT CLUB LN.
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 20-4964997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RASHWAN, HASSAN
10298 HUNT CLUB LN.
PALM BEACH GARDENS, FL 33418 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: RASHWAN, HASSAN
Address: 10298 HUNT CLUB LN.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP ( ) Delete
Name: RASHWAN, AHMED
Address: 10298 HUNT CLUB LN.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S ( ) Delete
Name: RASHWAN, AYAH
Address: 10298 HUNT CLUB LN.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T ( ) Delete
Name: RASHWAN, ISLAM
Address: 10298 HUNT CLUB LN.
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: HASSAN RASHWAN P 01/20/2009

Electronic Signature of Signing Officer or Director — Date