2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080220

Entity Name: ANGELIC REHAB CENTER, INC

FILED Apr 29, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

3100 NW 27TH AVENUE 8300 W FLAGLER ST. MIAMI, FL 33142 150

MIAMI, FL 33144

Current Mailing Address: New Mailing Address:

3100 NW 27TH AVENUE 8300 W FLAGLER ST. MIAMI, FL 33142

MIAMI, FL 33144

FEI Number: 20-5023981 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:

IGLESIAS, RENE CHI, SANTIAGO PD 3100 NW 27TH AVENUE 3820 S W 125TH AVE MIAMI, FL 33142 MIAMI, FL 33175

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: SANTIAGO CHI 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Title: IGLESIAS, RENE CHI, SANTIAGO PD Name: Name: 3100 NW 27TH AVENUE 3820 S W 125TH AVE. Address: Address:

City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 33175

Title: () Delete Title: VΡ () Change (X) Addition MIRANDA, ANTONIO VP Name: Name: Address: Address: 14348 S W 103RD ST. MIAMI, FL 33186 City-St-Zip: 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.

VΡ SIGNATURE: ANTONIO MIRANDA 04/29/2009