

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000113852

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** REHAB IDEAS, INC.

**Current Principal Place of Business:**

3802 SPECTRUM BLVD.  
112  
TAMPA, FL 33612 US

**New Principal Place of Business:**

300 STEVENS AVENUE  
OLDSMAR, FL 34677 US

**Current Mailing Address:**

3802 SPECTRUM BLVD.  
112  
TAMPA, FL 33612 US

**New Mailing Address:**

300 STEVENS AVENUE  
OLDSMAR, FL 34677 US

**FEI Number:** 03-0611835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANA, ROELING L COO  
3802 SPECTRUM BLVD.  
112  
TAMPA, FL 33612 US

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

STEPHEN, SUNDARRAO CEO  
300 STEVENS AVENUE  
OLDSMAR, FL 34677 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: STEPHEN SUNDARRAO

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: SUNDARRAO, STEPHEN  
Address: 300 STEVENS AVENUE  
City-St-Zip: OLDSMAR, FL 34677 US

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: STEPHEN SUNDARRAO

CEO

04/30/2012

Electronic Signature of Signing Officer or Director

Date