2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2011
Secretary of State

DOCUMENT# P06000116584

Entity Name: BOCA MEDICAL & REHAB CENTER, INC.

Current Principal Place of Business:

2706 W. ATLANTIC BLVD
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2706 W. ATLANTIC BLVD
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 20-5706797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MANIDIS, THOMAS M
2706 WEST ATLANTIC BOULEVARD
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

MANIDIS, THOMAS M
2706 WEST ATLANTIC BLVD.
POMPANO BEACH, FL 33069 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: THOMAS M. MANIDIS 04/26/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: MANIDIS, THOMAS M
Address: 2706 WEST ATLANTIC BLVD
City-St-Zip: POMPANO BEACH, FL 33069

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: THOMAS M. MANIDIS P 04/26/2011
Electronic Signature of Signing Officer or Director Date