

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000116584

FILED
Feb 24, 2012
Secretary of State

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 BLVD.
POMPANO BEACH, FL 33069 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: 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 MANIDIS

P

02/24/2012

Electronic Signature of Signing Officer or Director

Date