

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000100491

Entity Name: SUNRISE REHABILITATION INC.

FILED
Sep 30, 2009
Secretary of State

Current Principal Place of Business:

10427 OLD CUTLER ROAD #105
CUTLER BAY, FL 33190

New Principal Place of Business:

13953 SW 66 ST
808
MIAMI, FL 33183

Current Mailing Address:

10427 OLD CUTLER ROAD #105
CUTLER BAY, FL 33190

New Mailing Address:

13953 SW 66 ST
808
MIAMI, FL 33183

FEI Number: 26-0880140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, LOUIS D
16094 S.W. 55 TERRACE
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

LONDONO, NOHRA
13953 SW 66 ST
808
MIAMI, FL 33183 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: NOHRA LONDONO

09/30/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LONDONO, NOHRA
Address: 10427 OLD CUTLER ROAD #105
City-St-Zip: CUTLER BAY, FL 33190

Title: D () Delete
Name: CORREA, LUIS
Address: 10427 OLD CUTLER ROAD #105
City-St-Zip: CUTLER BAY, FL 33190

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LONDONO, NOHRA
Address: 13953 SW 66 ST 808
City-St-Zip: MIAMI, FL 33183

Title: D (X) Change () Addition
Name: CORREA, LUIS
Address: 13953 SW 66 ST 808
City-St-Zip: MIAMI, FL 33183

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: NOHRA LONDONO

D

09/30/2009

Electronic Signature of Signing Officer or Director

Date