

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000083606

FILED
Apr 27, 2012
Secretary of State

Entity Name: AVILES REHAB INC.

Current Principal Place of Business:

21830 SOUTHWEST 98TH AVE
CUTLER BAY, FL 33190

New Principal Place of Business:

Current Mailing Address:

21830 SOUTHWEST 98TH AVE
CUTLER BAY, FL 33190

New Mailing Address:

FEI Number: 38-3789970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVILES, NELSON M DPS
21830 SW 98 AVE.
CUTLER BAY, FL 33190 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: DPS
Name: AVILES, NELSON
Address: 21830 SOUTHWEST 98TH AVE
City-St-Zip: CUTLER BAY, FL 33190

Title: DV
Name: AVILES, YVETTE
Address: 21830 SOUTHWEST 98TH AVE
City-St-Zip: CUTLER BAY, FL 33190

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: NELSON M. AVILES

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date