2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099353

FILED Jan 18, 2012 Secretary of State

Entity Name: PHYSICAL THERAPY INSTITUTE AND AQUATIC REHAB INC

Current Principal Place of Business: New Principal Place of Business:

7171 N.UNIVERSITY DR. 106 PONCE DE LEON STREET SUITE 100 ROYAL PALM BEACH, FL 33411

TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

2651 IRMA LAKE DR 106 PONCE DE LEON STREET WEST PALM BEACH, FL 33411 ROYAL PALM BEACH, FL 33411

FEI Number: 80-0299947 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PAPA, JOHN
2651 IRMA LAKE DR
106 PONCE DE LEON STREET

WEST PALM BEACH, FL 33411 US ROYAL PALM BEACH, FL 33411 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: JOHN PAPA 01/18/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD Name: PAPA, JOHN

Address: 106 PONCE DE LEON STREET City-St-Zip: ROYAL PALM BEACH, FL 33411

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: JOHN PAPA P 01/18/2012