

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000018101

FILED
Feb 18, 2011
Secretary of State

Entity Name: RECOVERY REHABILITATION SERVICES INC

Current Principal Place of Business:

7025 W. HILLSBOROUGH AVE.
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15794
TAMPA, FL 33684

New Mailing Address:

FEI Number: 26-4432281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREYRA, LIZA
7025 W HILLSBOROUGH
TAMPA, FL 33634 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: PEREYRA, LIZA
Address: 7025 W HILLSBOROUGH
City-St-Zip: TAMPA, FL 33634

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: LIZA PEREYRA

P

02/18/2011

Electronic Signature of Signing Officer or Director

Date