2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2011
Secretary of State

DOCUMENT# P09000072108

Entity Name: HEALTH SOLUTIONS REHABILITATION , INC

Current Principal Place of Business:

3117 W. COLUMBUS DRIVE
SUITE 208
TAMPA, FL 33607

New Principal Place of Business:

3117 W. COLUMBUS DRIVE
SUITE 208
TAMPA, FL 33607 US

Current Mailing Address:

3117 W. COLUMBUS DRIVE
SUITE 208
TAMPA, FL 33607

New Mailing Address:

3117 W. COLUMBUS DRIVE
SUITE 208
TAMPA, FL 33607 US

FEI Number: 27-0813128 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORREA, HERNAN ALVAREZ
3117 W. COLUMBUS DRIVE
SUITE 208
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

JONES, ALAN F
3117 W. COLUMBUS DRIVE
SUITE 208
TAMPA, FL 33607 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: ALAN F JONES 04/21/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: JONES, ALAN F
Address: 3117 W. COLUMBUS DR, STE 208
City-St-Zip: TAMPA, FL 33607

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: ALAN F JONES P 04/21/2011
Electronic Signature of Signing Officer or Director Date