## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000034969

Entity Name: REHAB & WELLNESS SERVICES INC

**FILED** Feb 08, 2012 Secretary of State

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

10 NW 42 AVENUE 10 NW 42 AVENUE 210

215

US

MIAMI, FL 33126 MIAMI, FL 33126 US

**Current Mailing Address: New Mailing Address:** 

10 NW 42 AVENUE 10 NW 42 AVENUE 210

MIAMI, FL 33126 MIAMI, FL 33126 US

FEI Number: 27-2405563 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:

MAFFETONE, PETER J SR 3031 LAKEVIÉW BLVD. DELRAY BEACH, FL 33445

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:

MAFFETONE, PETER J SR Name: 3031 LAKEVIEW BLVD Address: City-St-Zip: DELRAY BEACH, FL 33445

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.

Ρ SIGNATURE: PETER MAFFETONE 02/08/2012