

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P10000060158

FILED
Nov 28, 2012
Secretary of State

Entity Name: FAMILY REHABILITATION CENTER 1,CORP.

Current Principal Place of Business:

4155 SW 130 AVE
SUITE 212
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

4155 SW 130 AVE
SUITE 212
MIAMI, FL 33175

New Mailing Address:

FEI Number: 27-3110216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERRERA, LIVAN
4155 SW 130TH AVE
SUITE 212
MIAMI, FL 33175 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: LIVAN HERRERA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HERRERA, LIVAN
Address: 4155 SW 130TH AVE SUITE 212
City-St-Zip: MIAMI, FL 33175

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: LIVAN HERRERA

Electronic Signature of Signing Officer or Director

P

11/28/2012

Date