

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000074479

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Entity Name:** BAPTIST REHABILITATION MANAGEMENT CORP.

**Current Principal Place of Business:**

11091 SW 63TH TER  
MIAMI, FL 33173 US

**New Principal Place of Business:**

**Current Mailing Address:**

11091 SW 63TH TER  
MIAMI, FL 33173 US

**New Mailing Address:**

**FEI Number:** 27-3682238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARICHAL, MABEL  
11091 SW 63TH TER  
MIAMI, FL 33173 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: MARICHAL, MABEL  
Address: 11091 SW 63TH TER  
City-St-Zip: MIAMI, FL 33173 US

Title: VP  
Name: LEMUS, EDEINI  
Address: 11091 SW 63TH TER  
City-St-Zip: MIAMI, FL 33173 US

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: MABEL MARICHAL

P

04/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date