2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2012
Secretary of State

DOCUMENT# P10000082010

Entity Name: SAND LAKE REHAB & WELLNESS CENTER, INC.

Current Principal Place of Business:

1650 SAND LAKE RD STE 255
ORLANDO, FL 33809

New Principal Place of Business:

1650 SAND LAKE RD STE 255
ORLANDO, FL 32809

Current Mailing Address:

1650 SAND LAKE RD
SUITE 255
ORLANDO, FL 33809

New Mailing Address:

1650 SAND LAKE RD
SUITE 255
ORLANDO, FL 32809

FEI Number: 27-3616601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOSA, ERADIO
1813 ALLAMANDA BLVD
AVON PARK, FL 33825 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: SOSA, ERADIO
Address: 1813 ALLAMANDA BLVD
City-St-Zip: AVON PARK, FL 33825

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: ERADIO SOSA P 01/06/2012

Electronic Signature of Signing Officer or Director Date