2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2011
Secretary of State

DOCUMENT# P10000095136

Entity Name: QUALITY CARE MEDICAL REHAB CORP

Current Principal Place of Business:

2940 W HILLSBOROUGH AVE
209
TAMPA, FL 33614

New Principal Place of Business:

6920 W LINEBAUGH AVE
STE. 102
TAMPA, FL 33625

Current Mailing Address:

2940 W HILLSBOROUGH AVE
209
TAMPA, FL 33614

New Mailing Address:

6920 W LINEBAUGH AVE
STE. 102
TAMPA, FL 33625

FEI Number: 27-3994331 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUELLAR, YAIMA
2940 W HILLSBOROUGH AVE
209
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

CUELLAR, YAIMA
6920 W LINEBAUGH AVE
STE. 102
TAMPA, FL 33625 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: _____ 04/19/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: GUEVARA, GIANINA
Address: 6920 W LINEBAUGH AVE STE.102
City-St-Zip: TAMPA, FL 33625

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: GIANINA GUEVARA P 04/19/2011
Electronic Signature of Signing Officer or Director — Date