

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000029356

FILED
Feb 09, 2012
Secretary of State

Entity Name: BETTER REHAB CENTER, INC.

Current Principal Place of Business:

8180 NW 36TH STREET STE. 227
DORAL, FL 33166

New Principal Place of Business:

7225 NW 25 STREET SUITE 217
MIAMI, FL 33122

Current Mailing Address:

8180 NW 36TH STREET STE. 227
DORAL, FL 33166

New Mailing Address:

7225 NW 25 STREET SUITE 217
MIAMI, FL 33122

FEI Number: 45-1147713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ABREU, GUILLERMO
14054 SW 260 ST
STE 106
HOMESTEAD, FL 33032 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: ABREU, GUILLERMO
Address: 14054 SW 260 ST., STE 106
City-St-Zip: HOMESTEAD, FL 33032

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: GUILLERMO ABREU

P

02/09/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date