2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# P11000043296

Entity Name: PROFESSIONAL REHAB THERAPY, INC.

Current Principal Place of Business:

3939 NW 7 ST
SUITE 202
MIAMI, FL 33125

New Principal Place of Business:

3939 NW 7 ST
SUITE 202
MIAMI, FL 33126

Current Mailing Address:

3939 NW 7 ST
SUITE 202
MIAMI, FL 33125

New Mailing Address:

3939 NW 7 ST
SUITE 202
MIAMI, FL 33126

FEI Number: 90-0718577 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLAZABAL, RAUL
3939 NW 7 ST
SUITE 202
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

OLAZABAL, RAUL
3939 NW 7 ST
SUITE 202
MIAMI, FL 33126 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: _____ 04/26/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D
Name: OLAZABAL, RAUL
Address: 3050 NW 13 ST
City-St-Zip: MIAMI, FL 33125

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: RAUL OLAZABAL D 04/26/2012
Electronic Signature of Signing Officer or Director — Date