

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000082775

**Entity Name:** CELEBRITY REHAB INC.

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

50 NW 15 STREET, STE. 101  
HOMESTEAD, FL 33030 US

**New Principal Place of Business:**

**Current Mailing Address:**

50 NW 15 STREET, STE. 101  
HOMESTEAD, FL 33030 US

**New Mailing Address:**

**FEI Number:** 45-3729243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HERNANDEZ, ERNIE  
18761 S.W. 297 STREET  
HOMESTEAD, FL 33030 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:** PSTD  
**Name:** HERNANDEZ, ERNIE  
**Address:** 18761 S.W. 297 STREET  
**City-St-Zip:** HOMESTEAD, FL 33030 US

**Title:** B  
**Name:** NUHFER, JOHNNY  
**Address:** 15431 SW 302 STREET  
**City-St-Zip:** HOMESTEAD, FL 33033

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:** ERNIE HERNANDEZ

PSTD

04/28/2012

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

\_\_\_\_\_  
Date