

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000097112

FILED
Mar 22, 2012
Secretary of State

Entity Name: THERAPEUTIC REHAB CENTER HL INC.

Current Principal Place of Business:

15411 SW 39 TERRA
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

15411 SW 39 TERRA
MIAMI, FL 33185

New Mailing Address:

FEI Number: 45-4028414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERRERA LOPEZ, ANDRO
15411 SW 39 TERRA
MIAMI, FL 33185 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: PD
Name: HERRERA LOPEZ, ANDRO
Address: 15411 SW 39 TERRA
City-St-Zip: MIAMI, FL 33185

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: ANDRO HERRERA LOPEZ

P

03/22/2012

Electronic Signature of Signing Officer or Director

Date