

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P12000001661

FILED
Nov 18, 2013
Secretary of State

Entity Name: Y D MEDICAL & REHABILITATION CENTER, INC

Current Principal Place of Business:

4999 W 8 AVE
SUITE #1
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4999 W 8 AVE
SUITE #1
HIALEAH, FL 33012

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

QUIROGA, KAREL
60 W. 11 ST.
APT 10
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

CASAS, EZEQUIEL S
4999 W 8 AVE
SUITE #1
HIALEAH, FL 33012 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: EZEQUIEL CASAS

Electronic Signature of Registered Agent

11/18/2013

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CASAS, EZEQUIEL S
Address: 4999 W 8 AVE SUITE #1
City-St-Zip: HIALEAH, FL 33012

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: EZEQUIEL CASAS

Electronic Signature of Signing Officer or Director

P

11/18/2013

Date