## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000049804

Entity Name: PROFESSIONAL TOUCH REHAB, INC.

FILED Mar 13, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:	
4733 W ATLANTIC AVE C15		
DELRAY BEACH, FL 33445		
Current Mailing Address:	New Mailing Address:	
1111 HYPOLUXO ROAD 107 LANTANA, FL 33462 US		
FEI Number: 65-0425112 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
NEMEROFSKY, STEPHEN 1111 HYPOLUXO ROAD 107 LANTANA, FL 33462 US		
The above named entity submits this statement for the puin the State of Florida.	urpose of changing its registered office or registered agent, or bo	oth,
SIGNATURE:		
Electronic Signature of Registered Agen	nt Date	

## **OFFICERS AND DIRECTORS:**

Title:

Name: NEMEROFSKY, TRACY A
Address: 1111 HYPOLUXO ROAD, #107
City-St-Zip: LANTANA, FL 33462 US

Title: VP

Name: NEMEROFSKY, STEPHEN L Address: 1111 HYPOLUXO ROAD, #107 City-St-Zip: LANTANA, FL 33462 US

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: STEPHEN NEMEROFSKY VP 03/13/2012