## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000077583 (1)

ONE TO ONE/INJURY REHABILITATION, INC.

BEOD URANUS TERRACE LAKE PARK FL 33403 US  3. Date Incorporated or Qualified 11/09/1993 05/01/1996  2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For Not Applieable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State 28. Country Country Country Country Country Country  Applied For Not Applieable State Fee Required Country Country  8. This corporation has liability for intengible tax under s. 199.032,	8600 URANUS TERRACE LAKE PARK FL 33403				
LAKE PARK FL 33403   LAKE PARK FL 33403-0125   US   State   LAKE PARK FL 33403-0125   US   State   LAKE PARK FL 33403-0125   State   LAKE PARK FL 33403-0125   US   State   US   US   US   US   US   US   US   U	LAKE PARK FL 33403	Mailing Address		1	88111 18811 1888
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. FEI Number 65-0449099 3. Molt Applied For 65-0449099 5. Certificate of Status Desired 5. Cert		P.O. BOX 12125 LAKE PARK FL 33403-0125	•		
26 Suite, Apt. #, etc.  Suite,				•	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Status Desired   S8.75 Additional Fee Required	<del></del> 1				<del></del>
27   City & State				03 0443033	CD 75 A 100
28 Trust Fund Contribution Added to Fees  Zip Country Zip Country B. Trust Fund Contribution Added to Fees  24 25 29 30 Florida Statutes Yes No  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  WALKER, MARK D P.O. BOX 12125 LAKE PARK FL 33403  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  PVTS  WALKER, MARK D SIRRET ADDRESS  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  WALKER, MARK D SIRRET ADDRESS  OTY-ST-ZIP  LAKE PARK FL  14 CITY-ST-ZIP  LAKE, PARK, FL  Added to Fees  Trust Fund Contribution  Added to Fees  Florida Statutes  Trust Fund Contribution  Added to Fees  Florida Statutes  Trust Fund Contribution  Added to Fees  Trust Fund Contribution  Added to Fees  Florida Statutes  Trust Fund Contribution in Internation Here in Internation  Added to Fees  Florida Statutes  Trust Fund Contribution  10. Name	22	27	MANUAL W. M. MANAL A. M.	5. Certificate of Status Desired	
Zip Country Zip Country Zip Country 30 S. This corporation has liability for intengible tay under s. 199.032, Florida Statutes Yes No No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WALKER, MARK D P.O. BOX 12125 LAKE PARK FL 33403  81 Name	<b>—</b>	h			
9. Name and Address of Current Registered Agent  WALKER, MARK D P.O. BOX 12125 LAKE PARK FL 33403  81			Country		
WALKER, MARK D P.O. BOX 12125 LAKE PARK FL 33403  82 Stroct Address (P.O. Box Number is Not Acceptable)  83 FL  84 City FL  85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE NAME WALKER, MARK D STREET ADDRESS R600 URANUS TERRACE LAKE PARK FL  13. SIREET ADDRESS 8600 URANUS TERRACE LAKE PARK, FL	24 25		30	Florida Statutes	Yes No
P.O. BOX 12125 LAKE PARK FL 33403  82 Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip Code    85   City   FL   85   Zip Code    86   City   FL   86   Zip Code    87   City   FL   86   Zip Code    88   City   FL   86   Zip Code    89   City   FL   80   Zip Code    80   City   FL   80   Zip Code    81   City   FL   85   Zip Code    82   Street Address (P.O. Box Number is Not Acceptable)  83   City   FL   85   Zip Code    84   City   FL   85   Zip Code    85   City   FL   85   Zip Code    86   City   FL   85   Zip Code    87   City   FL   85   Zip Code    88   City   FL   85   Zip Code    89   City   FL   85   Zip Code    89   City   FL   85   Zip Code    80   City   FL   85   Zip Code    81   City   FL   85   Zip Code    82   City   FL   85   Zip Code    83   City   FL   85   Zip Code    84   City   FL   85   Zip Code    85   City   FL   85   Zip Code    86   City   FL   85   Zip Code    87   City   FL   85   Zip Code    88   City   FL   85   Zip Code    89   City   FL   85   Zip Code    80   C	9. Name and Address of C	urrent Registered Agent			
LAKE PARK FL 33403  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent, and title diagraciable.  NOTE: Registered Agent signature required when teimstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PVTS  WALKER, MARK D  STREET ADDRESS  CHY-ST-ZIP  LAKE PARK FL  1.3 STREET ADDRESS  8600 URANUS TERRACE  LAKE PARK, FL  LAKE, PARK, FL			81 Name		
83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title 1 appricable.  NAME  NAME  NAME  WALKER, MARK D  STRET ADDRESS  B600 URANUS TERRACE  LAKE PARK FL  R5 Zip Code  City  FL 85 Zip Code  City  FL 85 Zip Code  City  FL 85 Zip Code  1 to registered or printed name of changing its registered or printed of directors. I hereby accept the appointment as registered agent signature required when reinstalling)  DATE  Signature, typed or printed name of registered agent and title 1 appricable.  (NOTE: Registered Agent signature required when reinstalling)  DATE  STRET ADDRESS  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  STRET ADDRESS  S600 URANUS TERRACE  LAKE PARK FL  LAKE PARK, FL  LAKE, PARK, FL			82 Street Add	fress (P.O. Box Number is Not Acceptable	e)
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Agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title. If applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  NAME  WALKER, MARK D  STREET ADDRESS  SHEET ADDRESS  CITY-ST-ZIP  LAKE PARK FL  DATE  1.4 CITY-ST-ZIP  LAKE, PARK, FL	11. Pursuant to the provisions of Sections 60	7.0502 and 607.1508, Florida Statute	es, the above-named cor	poration submits this statement for the pu	rpose of changing its registered
Signature: typed or printed name of registered agent and bite. It appricable.   (NOTE: Registered Agent signature required when reinstating)   DATE	agent. I am familiar with, and accept the	State of Florida, Such change was a obligations of, Section 607,0505, Flo	uthorized by the corpora rida Statutes.	ation's board of directors. I hereby accept	the appointment as registered
12. OFFICERS AND DIRECTORS  TIFLE  PVTS  NAME  NAME  STREET ADDRESS  CHY-ST-ZIP  OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TIFLE  S  WALKER, AUDREY  WALKER, AUDREY  A. STREET ADDRESS  8600 URANUS TERRACE  1.4 CHY-ST-ZIP  LAKE, PARK, FL	SIGNATURE				
TITLE PVTS DELETE 1.1 TITLE S DELETE S Addition  NAME WALKER, MARK D  STREET ADDRESS CITY-ST-ZIP LAKE PARK FL  DELETE 1.1 TITLE S WALKER, AUDREY A.  1.2 NAME WALKER, AUDREY A.  1.3 STREET ADDRESS 8600 URANUS TERRACE LAKE PARK FL  LAKE, PARK, FL					
NAME WALKER, MARK D STREET ADDRESS CHY-ST-ZIP  WALKER, AUDREY A.  ### WALKER, AUDREY A.  ### WALKER, AUDREY A.  ### WALKER, AUDREY A.  ### ### ### ### ### ### ### ### ### #					
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NAME WALKER, MARK D.	NAME				
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TITLE DELETE 3.1 TITLE Change Addition	TITLE	DELETE	3.1 TITLE		Change Addition
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	TITLE				
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	NAME STREET ADDRESS				
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TITLE DELETE 6.1 TITLE Change Addition	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Addition
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied that annual report is just and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the desired or trustee on powered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 in a power of the corporation of the c