

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000034899

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** COMPREHENSIVE REHAB TEAM ASSOCIATE INC.

**Current Principal Place of Business:**

10288 HUNT CLUB LANE  
PALM BEACH GARDENS, FL 33418 US

**New Principal Place of Business:**

**Current Mailing Address:**

10288 HUNT CLUB LANE  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

**FEI Number:** 65-0574947

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NASSIF, AMAL M  
10288 HUNT CLUB LA  
PALM BEACH GARDENS, FL 33418 US

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

ISHAK, EMAD A  
10288 HUNT CLUB LA  
PALM BEACH GARDENS, FL 33418 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: EMAD ISHAK

02/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ISHAK, EMAD A  
Address: 10288 HUNT CLUB LA  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V  
Name: NASSIF, AMAL M  
Address: 10288 HUNT CLUB LA  
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: EMAD ISHAK

P

02/16/2011

Electronic Signature of Signing Officer or Director

Date