## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000052675

Apr 13, 2004 Secretary of State

Entity Name: FLORIDA INSTITUTE OF REHABILITATION & SPORTS TRAINING, INC.

**Current Principal Place of Business: New Principal Place of Business:** 733 TEAL WAY NORTH PALM BEACH, FL 33408 **Current Mailing Address: New Mailing Address:** 733 TEAL WAY NORTH PALM BEACH, FL 33408 FEI Number: 65-0722790 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: NICHOLS, MICHAEL T 1920 PALM BEACH LAKES BOULEVARD SUITE 110 WEST PALM BEACH, FL 33409 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CEOP () Change () Addition Title: ( ) Delete Title: NICHOLS, MICHAEL T Name: Name: 733 TEAL WAY Address: Address:

City-St-Zip: N PALM BEACH, FL 33408 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL T. NICHOLS 04/13/2004 CEO