

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000065170

1. Entity Name

PHYSICAL THERAPY AND REHABILITATION MANAGEMENT, *R*

**FILED**  
**Jul 11, 2000 8:00 am**  
**Secretary of State**

07-11-2000 90173 017 \*\*\*150.00

Principal Place of Business

14840 S. MILITARY TRAIL  
DELRAY BEACH FL 33484  
US

Mailing Address

14840 S. MILITARY TRAIL  
DELRAY BEACH FL 33484  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0601400

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

BUTLER, BRUCE S  
7101 W MCNAB RD #103  
TAMARAC FL 33321

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE **DPS** ☐ Delete  
NAME **SALEHI, HAMID**  
STREET ADDRESS **8801 JOHNSON ST**  
CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE **VTD** ☐ Delete  
NAME **STANGER, JEFFREY**  
STREET ADDRESS **4560 NW 24TH WAY**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I 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 report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)



**PHYSICAL THERAPY  
& REHABILITATION  
MANAGEMENT, INC.**

Attachment  
DT 19501106572  
DW69204

July 5, 2000

Division of Corporations  
Uniform Business Report Filings  
Attn: Stacy  
PO Box 1500  
Tallahassee, FL 32302-1500

Dear Stacy:

Pursuant to our phone conversation of 7/5/00, the following is a recap of correspondence regarding the UBR filing for Physical Therapy & Rehabilitation Management. On 4/21/00, I sent the form with check number 879 for \$150.00. In early May, I received back the form and check saying the information on the form was not complete. I then got the preprinted form from my accountant faxed to me and sent it back with the check.

Today July 5, 2000, I received a second notice for filing. I then checked my bank statement saw the original check was never cashed and called you.

Thanks for your anticipated cooperation.

Sincerely,



Jeffrey L. Stanger

JLS/smr