

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080363

FILED
Apr 22, 2004
Secretary of State

Entity Name: PRO-ACTIVE REHABILITATION SERVICES, INC.

Current Principal Place of Business:

936 N VICTORIA PARK ROAD
FT LAUDERDALE, FL 33304 US

New Principal Place of Business:

936 N VICTORIA PARK ROAD
FT LAUDERDALE, FL 33304 US

Current Mailing Address:

1235 BUCHANAN STREET
HOLLYWOOD, FL 33019 US

New Mailing Address:

FEI Number: 65-0697672 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BARTH, KELLEY
1235 BUCHANAN STREET
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: BARTH, KELLEY
Address: 1235 BUCHANAN STREET
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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 Statutes. 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: KELLEY BARTH

DP

04/22/2004

Electronic Signature of Signing Officer or Director

Date