

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000000313

FILED
Jul 07, 2008
Secretary of State

Entity Name: FUNCTIONAL REHABILITATION, INC.

Current Principal Place of Business:

21090 WATER OAK TERRACE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

21090 WATER OAK TERRACE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-0719947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POMPILE, DOMENIC J
21090 WATER OAK TERRACE
BOCA RATON, FL 33428 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: POMPILE, DOMENIC J
Address: 21090 WATER OAK TERRACE
City-St-Zip: BOCA RATON, FL 33428

Title: MOA () Delete
Name: PIVNICK, MICHAEL B
Address: 9825 W SAMPLE RD SUITE 202
City-St-Zip: CORAL SPRINGS, FL 33065 PB

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL B. PIVNICK

MOA

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date