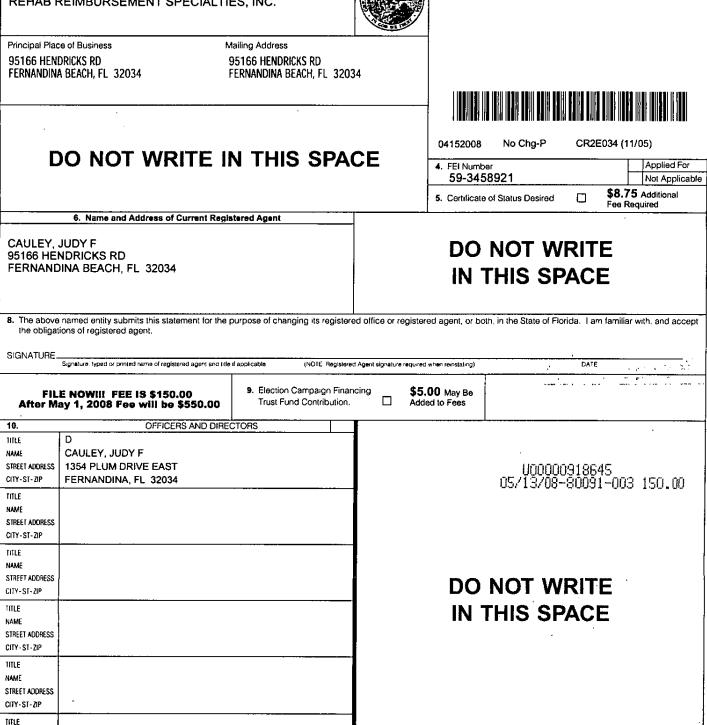
## 2008 FOR PROFIT CORPORATION

## ANNUAL REPORT DOCUMENT # P97000066138 REHAB REIMBURSEMENT SPECIALTIES, INC. Mailing Address 95166 HENDRICKS RD FERNANDINA BEACH, FL 32034 04152008

## **FILED** Apr 24, 2008 08:00 AN Secretary of State



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes..! 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:					
	Q1	CN	AT	HD	⊏.

NAME STREET AODRESS CITY-ST-ZIP