2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 02, 2006 08:00 A

2/27/06 521-742-3345

DOCUMENT # P98000103328 1. Entity Name WOOLBRIGHT PHYSICAL THERAPY INC.				Secretary of Stat			
Principal Place 3591 WOOLBR SUITE A BOYNTON BEA	RIGHT RD.	failing Address 3591 WOOLBRIGHT RD. SUITE A BOYNTON BEACH, FL 33436					
D	O NOT WRITE I	CE	01062006 4. FEI Numbe 65-088	No Chg-P	CR2E034 (11/05) Applied Fo Not Applic \$8.75 Additional Fee Required	or _	
	6. Name and Address of Current Reginary BRIGHT RD. SUITE A BEACH, FL 33436	DO NOT WRITE IN THIS SPACE					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State obligations of registered agent. SIGNATURE Signature, typed or garded name of registered agent and title if applicable: (NOTE Registered Agent signature required when reinstating)						ida. I am familiar with, and acc	ept
	NOW!!! FEE IS \$150.00 y 1, 2006 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.		.00 May Be ed to Fees			
NAME STREET ADDRESS	OFFICERS AND DIRE PD YBANEZ, RAY 3591 WOOLBRIGHT RD SUITE A BOYNTON BEACH, FL 33436	CTORS		-		452682 80889-821 150. 0 0	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS		• • • • • • • • • • • • • • • • • • • •			NOT W THIS SP		. (
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	<u> </u>	e and the second of the second			.		
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:							