2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 23, 2009
Secretary of State

DOCUMENT# P99000034670

Entity Name: ELITE HEALTH & REHABILITATION CENTER, INC.

Current Principal Place of Business:

6450 W 21 CT
SUITE 200
HIALEAH, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

6450 W 21 CT
SUITE 200
HIALEAH, FL 33016 US

New Mailing Address:

FEI Number: 65-0919396 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONCEPCION, JORGE
6450 W 21 CT
SUITE 200
HIALEAH, FL 33016 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: DPS ( ) Delete
Name: CONCEPCION, JORGE
Address: 6450 W 21 CT SUITE 200
City-St-Zip: HIALEAH, FL 33016

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CONCEPCION, JORGE
Address: 6450 W 21 CT SUITE 200
City-St-Zip: HIALEAH, FL 33016

Title: DS ( ) Change (X) Addition
Name: CONCEPCION, YANETXI
Address: 6450 W 21 COURT SUITE 200
City-St-Zip: HIALEAH, FL 33016

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: YANETXI CONCEPCION DS 09/23/2009

Electronic Signature of Signing Officer or Director Date