

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110748

FILED
Apr 27, 2009
Secretary of State

Entity Name: INTERNATIONAL REHAB PROFESSIONALS, INC.

Current Principal Place of Business:

17900 SW 5TH STREET
SUITE 103
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

17900 SW 5TH STREET
SUITE 103
PEMBROKE PINES, FL 33029 US

New Mailing Address:

FEI Number: 65-0970057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKLIN, DEHLIA
4761 SW 126TH AVENUE
SOUTHWEST RANCHES, FL 33330 US

Name and Address of New Registered Agent:

FRANKLIN, DEHLIA E DR
4761 SW 126TH AVENUE
SOUTHWEST RANCHES, FL 33330 US

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: DEHLIA E. FRANKLIN

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRANKLIN, DEHLIA
Address: 4761 SW 126TH AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: VS () Delete
Name: FRANKLIN, COLLIN
Address: 4761 SW 126TH AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FRANKLIN, DEHLIA E DR
Address: 4761 SW 126TH AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

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

Title: T () Change (X) Addition
Name: WEIR, SHAYHAN A DR
Address: 4761 SW 126TH AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33330

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: DEHLIA E. FRANKLIN

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04/27/2009

Electronic Signature of Signing Officer or Director

Date