

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S73459

FILED
Feb 07, 2007
Secretary of State

Entity Name: QUALITY REHAB SYSTEMS, INC.

Current Principal Place of Business:

1371 S. OCEAN BLVD
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

Current Mailing Address:

360 SE 5 CT.
POMPANO BEACH, FL 33060 US

New Mailing Address:

911 E. ATLANTIC BLVD
SUITE 106
POMPANO BEACH, FL 33060 US

FEI Number: 65-0260951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THERESA PANTANELLA
360 SE 5 CT
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

GILMOUR, KIMBERLY A ESQUIRE
4179 DAVIE ROAD
SUITE 101
DAVIE, FL 33314 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: KIMBERLY A. GILMOUR, ESQUIRE

02/07/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PANTANELLA, THERESA R
Address: 360 SE 5 COURT
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PANTANELLA, THERESA R PRES
Address: 911 E. ATLANTIC BLVD, SUITE 106
City-St-Zip: POMPANO BEACH, FL 33060

I hereby certify that the information supplied with this filing does not qualify for the 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: THERESA R. PANTANELLA, PRES

PRES

02/07/2007

Electronic Signature of Signing Officer or Director

Date