

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J36457

Entity Name: OCCUPATIONAL AND REHABILITATION CENTER, P.A.

Current Principal Place of Business:

6144 GAZEBO PARK PLACE S
STE. 101
JACKSONVILLE, FL 32257

Current Mailing Address:

6144 GAZEBO PARK PLACE S
STE. 101
JACKSONVILLE, FL 32257

FEI Number: 59-2720233

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABBAN, MARIO
6144 GAZEBO PARK PLACE S
STE. 101
JACKSONVILLE, FL 32257 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name TAN, JACKSON CDR
Address 6144 GAZEBO PARK PL. S # 101
City-State-Zip: JACKSONVILLE FL 32257

Title TR
Name TAN, JACKSON CDR.
Address 6144 GAZEBO PARK PL. S # 101
City-State-Zip: JACKSONVILLE FL 32257

Title PD
Name TAN, JACKSON C
Address 6144 GAZEBO PARK PL. S # 101
City-State-Zip: JACKSONVILLE FL 32257

Title S
Name TAN, JACKSON C
Address 6144 GAZEBO PARK PL. S # 101
City-State-Zip: JACKSONVILLE FL 32257

I hereby 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 all other like empowered.

SIGNATURE: JACKSON C. TAN

PRESIDENT

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date