2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2013
Secretary of State
CC6851468458

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Entity Name: REHAB & WELLNESS SERVICES INC

Current Principal Place of Business:

10 NW 42 AVENUE
210
MIAMI, FL 33126

Current Mailing Address:

10 NW 42 AVENUE
210
MIAMI, FL 33126 US

FEI Number: 27-2405563

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAFFETONE, PETER JSR
3031 LAKEVIEW BLVD.
DELRAY BEACH, FL 33445 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	P
Name	MAFFETONE, PETER JSR
Address	3031 LAKEVIEW BLVD
City-State-Zip:	DELRAY BEACH FL 33445

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: PETER MAFFETONE D 04/23/2013

Electronic Signature of Signing Officer/Director Detail — Date