

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000083486

Entity Name: VIDA REHAB. CENTER, CORP

Current Principal Place of Business:

410 W. 29TH STREET
SUITE B
HIALEAH, FL 33012

Current Mailing Address:

410 W. 29TH STREET
SUITE B
HIALEAH, FL 33012

FEI Number: 45-3459106

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, ERISBEL
470 E 18TH ST
HIALEAH, FL 33013 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 GARCIA, ERISBEL
Address 470 E 18TH ST
City-State-Zip: HIALEAH FL 33013

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: ERISBEL GARCIA

PD

02/15/2017

Electronic Signature of Signing Officer/Director Detail

Date