

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000107591

Entity Name: BISCAYNE REHABILITATION CENTER INC.

Current Principal Place of Business:

13903 NW 67 AVE # 310
MIAMI LAKES, FL 33014

Current Mailing Address:

13903 NW 67 AVE # 310
MIAMI LAKES, FL 33014

FEI Number: 45-4105275

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, MARGARITA
13903 NW 67 AVE # 310
MIAMI LAKES, FL 33014 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/D
Name CAMPILLO, LUIS MMD
Address 13903 NW 67 AVE # 310
City-State-Zip: MIAMI LAKES FL 33014

Title VP/D
Name FERNANDEZ, MARGARITA
Address 13903 NW 67 AVE # 310
City-State-Zip: MIAMI LAKES FL 33014

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: CAMPILLO , LUIS MMD

PRESIDENT

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date