2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2015
Secretary of State
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Entity Name: CENTER TREATMENT OF REHABILITATION,INC.

Current Principal Place of Business:

2800 W 84TH ST #11
HIALEAH, FL 33018

Current Mailing Address:

2800 W 84TH ST #11
HIALEAH, FL 33018

FEI Number: 45-4324231

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDINO, MANUEL R
1550 W 84TH ST STE 52
HIALEAH, 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
Name	ANDINO, MANUEL R
Address	150 W 84 ST #52
City-State-Zip:	HIALEAH 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: ANDINO , MANUEL R P 04/12/2015

Electronic Signature of Signing Officer/Director Detail — Date