2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2025
Secretary of State
8616351798CC

DOCUMENT# P13000004808

Entity Name: ROA REHABILITATION HEALTH SERVICES, INC.

Current Principal Place of Business:

16091 BLATT BLVD
APT 308
WESTON, FL 33326

Current Mailing Address:

16091 BLATT BLVD
APT 308
WESTON, FL 33326 US

FEI Number: 46-1767983

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROA, LUIS F
16091 BLATT BLVD
APT 308
WESTON, FL 33326 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	ROA, LUIS F
Address	16091 BLATT BLVD APT 308
City-State-Zip:	WESTON FL 33326

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: LUIS F ROA

ROA REHABILITATION HEALTH SERVICES, INC

03/24/2025

Electronic Signature of Signing Officer/Director Detail — Date