

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000074117

Entity Name: NEW LIFE REHAB MEDICAL CENTER INC

Current Principal Place of Business:

689 9TH ST NORTH #E
NAPLES, FL 34102

Current Mailing Address:

689 9TH ST NORTH #E
NAPLES, FL 34102

FEI Number: 35-0578285

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZEQUEIRA, YISEL
689 9TH ST NORTH #E
NAPLES, FL 34102 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: YISEL ZEQUEIRA

01/20/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	ZEQUEIRA, YISEL	Name	MARQUEZ, MADELYN
Address	689 9TH ST NORTH #E	Address	689 9TH ST NORTH #E
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102

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: YISEL ZEQUEIRA

PRESIDENT

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date