

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000061607

Entity Name: DE LEON REHAB INC

Current Principal Place of Business:

10422 NW 24TH PL
310
SUNRISE , FL 33322

Current Mailing Address:

10422 NW 24TH PL APT
310
SUNRISE , FL 33322 US

FEI Number: 88-3554203

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTRO, JUAN F
10422 NW 24TH PL APT 310
310
SUNRISE , FL 33322 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	DE LEON, MARIA C
Address	10422 NW 24TH PL APT 310, SUNRISE, FL 33322 310
City-State-Zip:	MIAMI LAKES FL 33322

Title	VP
Name	CASTRO, JUAN F
Address	110422 NW 24TH PL 310
City-State-Zip:	SUNRISE 33322

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: JUAN CASTRO

CEO

05/03/2024

Electronic Signature of Signing Officer/Director Detail

Date