2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000035378

Entity Name: OPTIMUM REHAB, INC.

Current Principal Place of Business:

145 MIDDLE ST.

1101

LAKE MARY, FL 32746

Current Mailing Address:

145 MIDDLE ST.

1101

LAKE MARY, FL 32746 US

FEI Number: 59-3237870 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUIZ-CORTES, FABIAN A 145 MIDDLE ST.

1101

LAKE MARY, FL 32746 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: FABIAN A. RUIZ-CORTES 01/21/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT

Name RUIZ-CORTES, FABIAN A

Address 145 MIDDLE ST.

1101

City-State-Zip: LAKE MARY FL 32746

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: FABIAN A RUIZ-CORTES

PRESIDENT

01/21/2020

FILED Jan 21, 2020

Secretary of State

8611938735CC

Date