2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2017
Secretary of State
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Entity Name: FLORIDA INSTITUTE OF REHABILITATION & SPORTS TRAINING, INC.

Current Principal Place of Business:

1920 PALM BEACH LAKES BLVD
110
WEST PALM BEACH, FL 33409

Current Mailing Address:

1920 PALM BEACH LAKES BLVD
110
WEST PALM BEACH, FL 33409

FEI Number: 65-0722790

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICHOLS, MICHAEL T
1920 PALM BEACH LAKES BOULEVARD
SUITE 110
WEST PALM BEACH, FL 33409 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	CEOP
Name	NICHOLS, MICHAEL T
Address	733 TEAL WAY
City-State-Zip:	N PALM BEACH FL 33408

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: MICHAEL T. NICHOLS CEO 02/15/2017

Electronic Signature of Signing Officer/Director Detail — Date