

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000097591

Entity Name: TRISTAR REHAB, INC.

Current Principal Place of Business:

8477 S. SUNCOAST BLVD.
HOMOSASSA, FL 34446

Current Mailing Address:

8477 S. SUNCOAST BLVD.
HOMOSASSA, FL 34446 US

FEI Number: 59-3487447

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALDROP, MARK
10070 W HALLS RIVER RD
HOMOSASSA, FL 34448 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	DS	Title	DP
Name	WALDROP, DREAMA M	Name	WALDROP, MARK
Address	10070 W HALLS RIVER RD	Address	10070 W HALLS RIVER RD
City-State-Zip:	HOMOSASSA FL 34448	City-State-Zip:	HOMOSASSA FL 34448

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: MARK WALDROP

CEO

01/29/2025

Electronic Signature of Signing Officer/Director Detail

Date