

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # P97000067065 (7)
 1. Corporation Name
SHREVEPORT REHAB, INC.



Principal Place of Business STE. 306, 2929 E. COMMERCIAL BLVD. FT. LAUDERDALE FL 33308	Mailing Address STE. 306, 2929 E. COMMERCIAL BLVD. FT. LAUDERDALE FL 33308
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3500 Fairfield Avenue Suite, Apt. #, etc.		2a. Mailing Address 26		3. Date Incorporated or Qualified 08/04/1997	
22 City & State 23 Shreveport, Louisiana		27 City & State		4. FEI Number 58-2351473 Applied For Not Applicable	
24 Zip 71104		25 Country 29 Caddo Parish		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
28 City & State		29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
30 Country		31 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
 CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent
 81 Name **LEONARD K. SAMUELS, ESQ.**
 82 Street Address (P.O. Box Number is Not Acceptable)
BERGER DAVIS & SINGERMAN
 83 **100 N.E. 3RD AVE., #400**
 84 City **FORT LAUDERDALE** **FL** 85 Zip Code **33301**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Ralph Rosenberg* DATE **3/30/98**

12. OFFICERS AND DIRECTORS		DELETED
TITLE	D	<input type="checkbox"/>
NAME	ROSENBERG, RALPH	
STREET ADDRESS	STE. 306, 2929 E. COMMERCIAL BLVD.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	P	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	V, S, T	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	GREEN, MATTHEW H.		
2.3 STREET ADDRESS	2929 E. COMMERCIAL BLVD., #306		
2.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ralph Rosenberg* **Ralph Rosenberg** **4-00-98** **956 938-3770**

CR2E034 (10/97)