

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 JUN 26 PM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02 000003266
1. Entity Name
MEXCO HEALTH SOLUTIONS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
100 PARSONS POND DR.
3. Mailing Address
100 PARSONS POND DR.
TAX DEPT F1-5A

City & State
FRANKLIN LAKES NJ
City & State
FRANKLIN LAKES NJ
Zip
07417
Country
USA
Zip
07417
Country
U.S.A.

400021272454
07/02/03--01056--005 **150.00
DO NOT WRITE IN THIS SPACE

4. FEI Number
28-3461740
5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
CT CORPORATION SYSTEM
Street Address (P.O. Box Number is Not Acceptable)
100 South Pine Island Road
City
Plantation
FL Zip Code
33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when replacing)
DATE _____
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State
9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		
TITLE P/D	NAME DAVID SNOW STREET ADDRESS 100 PARSONS POND DR. CITY-ST-ZIP FRANKLIN LAKES, NJ 07417	DO NOT WRITE IN THIS SPACE
TITLE VP	NAME ROBERT MCGOVERN STREET ADDRESS 100 PARSONS POND DR. CITY-ST-ZIP FRANKLIN LAKES, NJ 07417	DO NOT WRITE IN THIS SPACE
TITLE T/VP	NAME WALTER HOSP STREET ADDRESS 100 PARSONS POND DR. CITY-ST-ZIP FRANKLIN LAKES, NJ 07417	DO NOT WRITE IN THIS SPACE
TITLE S	NAME DAVID MACHLOWITZ STREET ADDRESS 100 PARSONS POND DR. CITY-ST-ZIP FRANKLIN LAKES, NJ 07417	DO NOT WRITE IN THIS SPACE
TITLE VP	NAME ROBERT BLYSKAL STREET ADDRESS 100 PARSONS POND DRIVE CITY-ST-ZIP FRANKLIN LAKES, NJ 07417	DO NOT WRITE IN THIS SPACE
TITLE D	NAME RICHARD RUBINO STREET ADDRESS 100 PARSONS POND DR. CITY-ST-ZIP FRANKLIN LAKES, NJ 07417	DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert McGovern 4/28/03 201-269-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

7/6/26