2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H64082

FILED Apr 17, 2003 Secretary of State

Entity Name: SCHARRESEN CONSOLIDATED HEALTH SERVICES, INC.

Current P	rincipal Place	e of Business:	New Principal Plac	New Principal Place of Business:	
	04TH STREE ORES, FL 331			1301 NE 104TH STREET MIAMI SHORES, FL 33138	
Current M	lailing Addres	ss:	New Mailing Addre	New Mailing Address:	
1301 NE 104TH STREET MAIMI SHORES, FL 33138				1301 NE 104TH STREET MIAMI SHORES, FL 33138	
FEI Number	: 59-2551701	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
900 SUN E	R,ATLEE W.,II BANK BUILDIN KELL AVENUE 33131	lG			
	e named entity e of Florida.	submits this statement for the	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
	mpaign Financin S AND DIREC	g Trust Fund Contribution(). TORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PST (SENA, CATHY 1301 NE 104 S MIAMI, FL	· · · · · · · · · · · · · · · · · · ·	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CATHY S. SENA PRES 04/17/2003