| CORF<br>ANNU  | POFIT<br>PORATION<br>AL REPORT<br>1996   |  |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORA¥IONS   |  |   |  |  |                                |                        |  |                                     |   |
|---|--|--|--|--|--|---|--|--|--------------------------------|------------------------|--|-------------------------------------|---|
| DOCUN<br>1. Corporation   |  | M5751  | 6  | (0)  | )  |   |  |  |                                |                        |  |                                     |   |
| MODE  | LO HEALTH (  | CARE CENTER  | INC.                                       |  |  |   |  | !  | #                              | 1 <b>810 A</b> nia Bio | ili <b>2:1</b> 11 <b>4</b> 10                | II <b>b</b> erte di                 | 18 (1 <b>3 : 1</b> (1 )                       |
| Principal Place of  | of Business  |  | Mail                                       | ling Address   |  |   |  |  |                                |                        |  |                                     |   |
| 3601 W 11TH AVE.<br>3601 W. 11TH AVE.<br>HIAHEAH FL 33012<br>US   |  |  | ;  | 1401 E 4TH AVE<br>SUITE 102<br>HIALEAH FL 33010<br>US  |  | 3 05  | Date Incorporated or Qualified   3a. Date of Last Report |  |                                |                        |  |                                     |   |
| 03  |  |  | ,  | US .   |  |   | 3. 22  | 08/17/1987   |                                | Ja. D.                 | 04/24  |                                     |   |
| 2. Principal Plac   | ce of Business   |  |  | Mailing Address  |  |   | <b>4</b> . FE  | I Number   |                                |                        |  | <b>→</b> ' '                        | lied For                                      |
| Suite, Apt. #   | , etc.   |  | 26   | Suite, Apt. #. etc.  |  |   |  | 65-00099   |                                |                        | \$8  |                                     | Applicable                                    |
| 22 Ch. P. Chah  | =,u.,  |  | 27   |  |  |   |  | ertificate of Status   |                                |                        | F  | ee Req                              | uired   |
| City & State  |  | 1  | 28   | Oity & State   |  |   |  | ection Campaign<br>ast Fund Contrib  |                                |                        |  | . <b>00</b> M                       |   |
| Zip   | F1   | intry  |  | ? <sub>і</sub> р   | Countr   | у   | 8. Th  | is corporation ha  | s liability for                |                        |  |                                     |   |
| 24  | 9. Name and Ad   | dress of Current Re  | 29<br>egiste                               | ered Agent   | [30]   |   | I  | orida Statutes<br>ame and Addre  |                                | s ∐No<br>Registere     | d Agent                                      |                                     |   |
|   |  |  |  |  | 81   | 1 Name  |  |  |                                |                        | - 190  |                                     |   |
| T1 () (A  | ALUDA LOCA   |  |  |  |  |   |  |  |                                |                        |  |                                     |   |
|   | QUIRANTES  | 100  |  |  | 82   | 2 Street Ad   | Idress (P.O.   | Box Number is N  | lot Acceptat                   | 5·e)                   |  |                                     |   |
| 1401 E  | 4TH AVE - STE  | 102  |  |  | 82   |   | Idress (P.O.   | Box Number is N  | lot Acceptat                   | 5-e)                   |  |                                     |   |
| 1401 E  |  | 102  |  |  | 83   | 3   | Idress (P.O.   | Box Number is N  | lot Acceptab                   | o-e)                   |  | 7.0                                 |   |
| 1401 È<br>HIALEA  | 4TH AVE - STE<br>H FL 33010  |  |  | 1502   | 83   | Gity  |  |  |                                | F                      | L 85   | Zip Co                              |   |
| 1401 E<br>HIALEA  | 4TH AVE - STE<br>H FL 33010  | ections 607,0502 and<br>the State of Fiorida<br>Signations of, Section 6   | 9 607.<br>Such a<br>507.05                 | 1508, Florida Statut<br>shange was authoriz<br>505, Florida Statutes   | 83<br>84<br>es. the above  | Gity  | noration subv  | nits this statemen   | al for the nu                  | F                      | L hanging i                                  | to rooie                            | torod office                                  |
| 1401 E HIALEA  11. Pursuant to or registere familiar with SIGNATURE   | 4TH AVE - STE<br>H Ft. 33010<br>the provisions of S<br>d agent, or both, in<br>, and accept the ob-  | ections 607,0502 and   | 607.05                                     | erange was authoriz<br>505. Florida Statutes   | es, the above red by the corps.  | 4 City named corp   | poration subposed of direct                              | nits this statemer<br>tors I hereby acc  | al for the nu                  | Frose of cintment      | L hanging i                                  | to rooie                            | torod offic                                   |
| 11. Pursuant to or registere familiar with SIGNATURE S  | 4TH AVE - STE<br>H Ft. 33010<br>the provisions of S<br>d agent, or both, in<br>, and accept the ob-  | ections 607.0502 and<br>the State of Fiorida S<br>oligations of, Section 6   | 8007.05<br>607.05<br>tris Та <sub>йй</sub> | Prange was aumoriz<br>505, Florida Statutes<br>Pranie //Nr.  | 83<br>84<br>es. the above  | 4 City named corp   | poration subr<br>pard of direct                          | nits this statemer<br>tors I hereby acc  | nt for the purept the app      | Forpose of circlement  | changing i<br>as registe                     | its regis<br>red age                | itered officent. I ani                        |
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SIGNATURE: [

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/96 (305)882-8180