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FILED
Jan 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 # P93000021267 (8)

1. Corporation Name

IMMEDIATE CARE ENTERPRISE, INC.

Principal Place of Business

4603 N UNIVERSITY DR.
LAUDERHILL FL 33351

Mailing Address

4603 N UNIVERSITY DR.
LAUDERHILL FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1993

4. FEI Number

65-0403182

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

SANSIL, YASSER
8409 FOREST HILLS BLVD #301
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name YASSER SANSIL
82 Street Address (P.O. Box Number is Not Acceptable)
11597 NW 3rd Place
83
84 City Coral Springs FL 85 Zip Code 33071

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

president

1-15-98

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME PS
STREET ADDRESS SANSIL, YASSER S
CITY-ST-ZIP 8409 FOREST HILLS BLVD #301
CORAL SPRINGS FL

1.2 TITLE ☐ DELETE

NAME VT
STREET ADDRESS SANSIL, TAIF A
CITY-ST-ZIP 8409 FOREST HILLS BLVD #301
CORAL SPRINGS FL

1.3 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

NAME PS
STREET ADDRESS SANSIL, YASSER
CITY-ST-ZIP 11597 NW 3rd Place
CORAL SPRINGS, FL 33071

1.2 TITLE ☐ Change ☐ Addition

NAME VT
STREET ADDRESS SANSIL, TAIF
CITY-ST-ZIP 11597 NW 3rd Place
CORAL SPRINGS, FL 33071

1.3 TITLE ☐ Change ☐ Addition

1.4 TITLE
1.5 NAME
1.6 STREET ADDRESS
1.7 CITY-ST-ZIP

1.8 TITLE ☐ Change ☐ Addition

1.9 TITLE
1.10 NAME
1.11 STREET ADDRESS
1.12 CITY-ST-ZIP

1.13 TITLE ☐ Change ☐ Addition

1.14 TITLE
1.15 NAME
1.16 STREET ADDRESS
1.17 CITY-ST-ZIP

1.18 TITLE ☐ Change ☐ Addition

1.19 TITLE
1.20 NAME
1.21 STREET ADDRESS
1.22 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:

CR2E034 (10/97)