

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90058 031 ***158.75

DOCUMENT # P94000033937

1. Entity Name
MULTIPLAN USA CORPORATION

Principal Place of Business 2 S. BISCAYNE BLVD SUITE 1800 MIAMI FL 33131 US	Mailing Address 2 SOUTH BISCAYNE BLVD SUITE 1800 MIAMI FL 33131-1808 US
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0492820	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent DANIELS, NICHOLAS M SUNTRUST INTERNATIONAL CENTER ONE S.E. 3RD AVE, STE. 2400 MIAMI FL 33131			7. Name and Address of New Registered Agent		
			Name Rafael A. Perez		
			Street Address (P.O. Box Number is Not Acceptable) 2 S. Biscayne Blvd., Suite 1800		
			City Miami		FL Zip Code 33131-1808

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.

SIGNATURE *Rafael A. Perez* (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---	--

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete PERES, JOSE I. 2 S BISCAYNE BLVD #1800 MIAMI FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	<input type="checkbox"/> Delete LOPEZ, EDUARDO F. 2 S BISCAYNE BLVD #1800 MIAMI FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP	<input type="checkbox"/> Delete DE ZARRAGA, MANUEL 2 S BISCAYNE BLDV #1800 MIAMI FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	<input type="checkbox"/> Delete ROMERO, LUIS ALFREDO 2 S BISCAYNE BLVD #1800 MIAMI FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP	<input type="checkbox"/> Delete BARNES, MARCELLO 50 LA GORCE CIR MIAMI BEACH FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Rafael A. Perez* DATE 4/19/00 (305) 358-5522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/99)