2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P95000091524

DOCUMENT# 1. Entity Name



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90248 046 ***150.00

_	DICAL MANAGEMENT, INC.				1		
Principal Place of Business 1505 NW 167 STREET SUITE 450 MIAMI FL 33169		Mailing Address 1505 NW 167 STREET SUITE 450 MIAMI FL 33169					H a hka kiah alah 1881
2. Principal F	Place of Business	3. Mailing Address	··········				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF M	MAKING CHAI	NGES
City & State		City & State		4	4. FEI Number 65-0622851 Applied For Not Applicable		
Zip	Country	Zip	Country	5	i. Certificate of Status Desired		5 Additional equired
	6. Name and Address of Current	Registered Agent	 	7	. Name and Address of New Regi		
	<u>- </u>		Name	· · ·			
LEAHY, R	obert j 167 street		Street A	ddress (P.O	. Box Number is Not Acceptable)		
SUITE 450							·
MIAMI FL	٠٨.		City		· · · · · · · · · · · · · · · · · · ·	FL Zi	p Code
8. The above	named entity submits this statement fo	r the purpose of changing its r	egistered office or	registered	agent, or both, in the State of Florida		with, and accep
the obligat	tions of registered agent.						
SIGNATURE .	Signature, typed or printed name of registered agent	ANOTE:	Demistered Agent signatu	va a irad ub-	a signatulo d	DATE	
	Signature, typed or printed name of registered agent	and title if applicable, (NOTE:	Registered Agent signatu	ne reduited wife	n reinstating)	UAIE	
F	ILE NOW!!! FEE IS \$150.00						
-					9 Election Campaign Finance	sina	\$5.00 u
Afte	r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State			 Election Campaign Finance Trust Fund Contribution. 		\$5.00 May Be Added to Fees
Afte	May 1, 2003 Fee will be \$550.00		11.		Trust Fund Contribution.		Added to Fees
After Make Check	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND		11. TITLE				Added to Fees
After Make Check 10. TITLE NAME	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND PD LEAHY, ROBERT	DIRECTORS Delete	TITLE NAME		Trust Fund Contribution.	RS AND DIREC	Added to Fees
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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 Block 11 if changed, or on an attachment with amaddress, with all other like empowered.

SIGNATURE:

305-614-0100