2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000071127

1. Entity Name

J.C. MOLINA, P.A.

FILED
Apr 13, 2000 8:00 am
Secretary of State
04-13-2000 90116 021 ***150.00

Principal Place of Business	Mailing Address
7241 SW 132 AVE MIAMI FL 33183	7241 SW 132 AVE MIAMI FL 33183-3465

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
275 Fontainebleau Blvd	275 Fontainebleau blvd
Suite, Apt. #, etc. #130	Suite, Apt. #, etc. #130
City & State MIAMI, FL.	City & State MIAMI, FL
Zip 33172 Country	Zip 33172 Country

4. FEI Number 65-0204025 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOLINA, JULIO C
7241 SW 132 AVE
MIAMI FL 33183

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 [signature] 4/3/00
Signature, typed or printed name of registered agent and title if applicable (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. (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. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOLINA, JULIO C 7241 SW 132 AVE MIAMI FL 33183	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/99)

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: [signature] JULIO C. MOLINA 4/3/00 305 225 8066
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #