| SECOND N | IOTICE: CORPORATION | WILL BE DISSOLVE | D ON OR AFTER A | UGUST 7, 1996. | | |
|--|---|---|--|--|--|--|
| MOUNT DUE ON | OR BEFORE 8/7/96: \$61.25 | (IF DISSOLVED, MINI | FLORIDA DEPART | 10 HEINSTATE: \$230.2 | 5.) | |
| | PORATION | | Sandra B. | | | |
| | AL REPORT 1 996 | | Secretary DIVISION OF CO | | | |
| DOCUM | | 32717 | (4) | | | |
| 1. Corporation | Name IST CLUB OF MED | | • • | | | |
| OPTIM | IIST GLUB OF MED | JECT, FEORIDA, | ino. | | | |
| Principal Place | of Business | Mailin | g Address | | | II 1881 SIBII Bibil Bibil Bibil Bibil Bibil Bibil |
| 7331 NW 74 STREET 7331 NW 74 STREET MIAMI FL 33166 MIAMI FL 33166 | | | | | | |
| Wirth 12 3010 | ~ | | | | 3. Date Incorporated or Qualified 05/08/1975 | 3a. Date of Last Report 05/26/1995 |
| 2. Principal Pla | ace of Business | 2a. Ma | ailing Address | | 4. FEI Number 23-7424610 | Applied For |
| Suite, Apt. # | t etc | | ite, Apt. #, etc. | | | Not Applicable \$8.75 Additional |
| 22 | | 27 | ty & State | | Certificate of Status Desired Bestion Campaign Financing | Fee Required \$5.00 May Be |
| City & State | | 28 | | 0-1-1-1 | Trust Fund Contribution | Added to Fees |
| Zip 24 | Country 25 | Zij 29 | · • | Country 30 | This corporation has liability for Florida Statutes | Yes No |
| | 9. Name and Address | of Current Registere | ed Agent | 81 Name | 10. Name and Address of New Re | egistered Agent |
| | IN, DANNY | | | | ddress (P.O. Box Number is Not Acceptat | ob) & SEOV |
| 7604 N MEDIE | W 68P Y FL 33166 | | | 83 00 | 81 NW SO. Piven I |) |
| (IIILDEL | | | | 84 City | eacy The | FL 85 Zip Code 6 |
| | | | | | | |
| 11. Pursuant t | to the provisions of Section | ns 617.0502 and 617. | 1508, Florida Statute | s, the above-named c | orporation submits this statement for the p | ourpose of changing its registered of the appointment as registered |
| agent. I ar | to the provisions of Section egistered agent, or both, in m familiar with, and accept | ns 617.0502 and 617. n the State of Florida. of the obligations of, Se | 1508, Florida Statute Such change was au ection 617.0503, Flor | s, the above-named cuthorized by the corporida Statutes | orporation submits this statement for the pration educate of directors. I hereby accept | ourpose of changing its registered of the appointment as registered |
| agent. I an | Signature, typed or printed name of | registered agent and title if ap | plicable (NOTE | E Registeren Agent signature | equired when reinstating) | 6/28/96 |
| agent. I ar | Signature, typed or printed name of | trie congations of, Se | plicable (NOTE | bouri | equied when reinstating) ADDITIONS/CHANGES TO OFF | 6/28/96 |
| SIGNATURE | Signature, typed or printed name of OFF P CANNY, HELEN | registered agent and title if ap | iplicable (NOTE | E Registeren Agent signature : 13. 1.1 TITLE 1.2 NAME | equired when reinstating) | 6/28/96 |
| SIGNATURE _ 12. TITLE NAME STREET ADDRESS | Signature, typed or printed name of OFF P CANNY, HELEN 1270 RED BIRD A | registered agent and title if ap FICERS AND DIRECTO | phicable (NOTE DRS | E Registered Agent signature : 13. 1.1 TITLE | equisor when reinstating) ADDITIONS/CHANGES TO OFF (Passiden T) Addingues Browns Alsi nulso. Rich Browns Medley Fyg. | DATE ICERS AND DIRECTORS IN 12 CH Change Addition CONTROL Addition CONTROL ADDITION AND DIRECTORS IN 12 CONTROL ADDITION AND DIR |
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| SIGNATURE _ 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of OFF P CANNY, HELEN 1270 RED BIRD A' MIAMI SPRINGS F ST RODRIGUEZ, RAM | (registered agent and title if apprint apprint apprint apprint apprint a | phicable (NOTE DRS | E Registery Agent signature: 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP | equisor when reinstating) ADDITIONS/CHANGES TO OFF (Passiden T) Addingues Browns Alsi nulso. Rich Browns Medley Fyg. | DATE ICERS AND DIRECTORS IN 12 CH Change Addition CONTROL Addition CONTROL ADDITION AND DIRECTORS IN 12 CONTROL ADDITION AND DIR |
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