

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F93000002238

FILED  
Jan 29, 2002 8:00 AM  
Secretary of State

Entity Name: OPTION CARE OF MELBOURNE, INC.

## Current Principal Place of Business:

809 E. HIBISCUS BLVD.  
MELBOURNE, FL 32901

## New Principal Place of Business:

1600 SARNO ROAD  
SUITE 10  
MELBOURNE, FL 32935

## Current Mailing Address:

809 E. HIBISCUS BLVD.  
MELBOURNE, FL 32901

## New Mailing Address:

1600 SARNO ROAD  
SUITE 10  
MELBOURNE, FL 32935

FEI Number: 58-2021377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, DAKSHA  
1835 N HWY A1A, UNIT 303  
INDIALANTIC, FL 32903 US

## Name and Address of New Registered Agent:

JACKSON, ROBERT W JR  
792 LAKE GEORGE DRIVE  
MELBOURNE, FL 32940 US

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: ROBERT JACKSON

01/29/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PATEL, PRADIP  
Address: 3029 ALTAMA AVENUE  
City-St-Zip: BRUNSWICK, GA 31520

Title: S ( ) Delete  
Name: DAKSHA, PATEL  
Address: 1835 N HWY A1A, UNIT 303  
City-St-Zip: INDIALANTIC, FL 32903

Title: S ( ) Delete  
Name: JACKSON, ROBERT W JR  
Address: 792 LAKE GEORGE DRIVE  
City-St-Zip: MELBOURNE, FL 32940

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT JACKSON

MGR

01/29/2002

Electronic Signature of Signing Officer or Director

Date