

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2002 8:00 am
Secretary of State

03-19-2002 90030 002 ***150.00

DOCUMENT # **F98000002692** ✓
1. Entity Name
Interim Healthcare Holdings Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1601 Sawgrass Corp. Pkwy.
Suite, Apt. #, etc.

3. Mailing Address
1601 Sawgrass Corp. Pkwy.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Surprise, FL
Zip
33323
Country
US

City & State
Surprise, FL
Zip
33323
Country
US

4. FEI Number
13-3967974
Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Raphael D. Umansky, Esq.
Street Address (P.O. Box Number is Not Acceptable)
1601 Sawgrass Corporate Pkwy.
City
Surprise **FL** Zip Code
33323

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 *Raphael D. Umansky, Esq.* *2/21/02*
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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P Michael F. Schundler
1601 Sawgrass Corp. Pkwy.
Surprise, FL 33323

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Daniel Cammarata
1601 Sawgrass Corp. Pkwy.
Surprise, FL 33323

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S Raphael D. Umansky
1601 Sawgrass Corp. Pkwy.
Surprise, FL 33323

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Dana J. O'Brien
717 Fifth Avenue
New York, NY 10022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Allen C. Sorensen
1601 Sawgrass Corp. Pkwy.
Surprise, FL 33323

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D Stephen L. Larson
717 Fifth Avenue
New York, NY 10022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Raphael D. Umansky* *2/21/02* *(954) 858-6000*
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034B (12/01)



Attachment
doc# F98000002692
425/50

February 21, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Name Change

To Whom It May Concern:

This attachment is to advise of a change in our business owner's name from Catamaran Acquisition Corporation to Interim Healthcare Holdings, Inc effective October 25, 2001. Please note this is a name change only, no other changes have occurred.

If you have any questions or concerns, please contact me at (954) 858-2744 between 9:00 am- 2:00 pm (until April 5, 2002), or Kathy Brihm at (954) 858-2638.

Thank you,

A handwritten signature in cursive script that reads "Caryn Campbell".

Caryn Campbell,
Tax Consultant