

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 13, 2001 8:00 am**  
**Secretary of State**

09-13-2001 90019 012 \*\*\*550.00

0075690 AV

**DOCUMENT # F99000004490**

1. Entity Name  
**MEDEWORKS, INC.**

Principal Place of Business 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431	Mailing Address 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5065 Highway A1A Suite, Apt. #, etc.	3. Mailing Address 5065 Highway A1A Suite, Apt. #, etc.
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City & State Vero Beach, Florida	City & State Vero Beach, Florida	4. FEI Number 06-1530460	Applied For <input type="checkbox"/> Not Applicable
Zip 32963	Country United States	Zip 32963	Country United States

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

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 \_\_\_\_\_ (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.  **FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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	<b>P</b> <b>AVERILL, PAUL</b> 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>PLEASE SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>MARKOWITZ, VICTOR</b> 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PLEASE SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>SNYDER, DONALD</b> 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PLEASE SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CARUOLO, GEORGE D</b> 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PLEASE SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD</b> <b>SNOWDEN, GUY B</b> 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PLEASE SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RUBIN, GERALD</b> 2790 NORTH FEDERAL HIGHWAY, 4TH FLOOR BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PLEASE SEE ATTACHED</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition

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 a name like empowered.

SIGNATURE: John E. Taylor, Jr. 09.05.01 561 231 5858

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

Attachment  
DH F990000004690  
A0085839

Florida Department of State  
Division of Corporations  
2001 Uniform Business Report

11. Officers and Directors

Delete

Title: P/D  
Name: Averill, Paul  
Street Address: 2790 North Federal Highway, 4<sup>th</sup> Floor  
City, State, Zip: Boca Raton, Florida 33431

12. Additions/Changes to Officers and Directors in 11

Additions

Title: P/D  
Name: Taylor, Jr., John E.  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963

Title: D  
Name: Tessarowicz, Michael  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963

Changes

Title: S/D  
Name: Markowicz, Victor  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963

Title: T/D  
Name: Snyder, Donald D.  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963

Title: D  
Name: Caruolo, George D.  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963

Title: C/D  
Name: Snowden, Guy B.  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963

Title: D  
Name: Rubin, Gerald  
Street Address: 5065 Highway A1A  
City, State, Zip: Vero Beach, Florida 32963