2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # J31759				FILED Apr 02, 2003 8:00 am Secretary of State	
	HEALTH, INC.			04-02-2003 9008 / 033 ****130.00	
Principal Place of Business 1200 S. PINE ISLAND RD 1200 S. PINE ISLAND RD 320 PLANTATION FL 33324 US Mailing Address 1200 S. PINE ISLAND R 320 PLANTATION FL 33324 US		D			
2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Apt. #, etc.					
			CHECK HERE IF MAKING CHANGES		
City & State City & State			4. FEI Number 59-2731922 Applied For Not Applicable		
Zip	Country	Zip	Country	5. Certificate of Status Desired	
6. Name and Address of Current Registered Agent Name			7. Name and Address of New Registered Agent		
BAYLESS, THOMAS 1200 S. PINE ISLAND RD 320			<u></u>	(P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324 City 8: The above named entity submits this statement for the purpose of changing its registered office or regist the obligations of registered agent.				FL Zip Code ered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature typed or printed name of registered to	mento title it applicable. (NO	V / H IE: Registered Agent signature requir	3/31/o 3	
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 x Payable to Florida Departmen			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	
10.		ND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAYLESS, THOMAS 200 E LAS OLAS BLVD., SUIT FT LAUDERDALE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAYLESS, PATRICIA 200 E LAS OLAS BLVD FT LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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indicated of the cor	on this report or supplemental report	t is true and accurate and that in powered to execute this report	my signature shall have the as required by Chapter 60	section 119.07(3)(i), Florida Statutes. I further certify that the information is same legal effect as if made under oath; that I am an officer or director of the same statutes; and that my name appears in Block 10 or Block 11 if	

SIGNATURE: