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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K29354

(3)

UNIVERSAL MULTICARE MEDICAL CENTER, INC.

| Mailing Address Milduel A. Alivor on Yusuf Rajabatee 2131 S.W. 27TH AVE MIAMI FL 33145 PO BOX 144634 CORAL GABLES FL 33114-4634 US 3. Date Incorporated or Qualified 07/25/1988 03/22/1996 2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualified 07/25/1988 03/22/1996 4. FEI Number 65-0072575 Not Applied For Not Applied For Not Applicable Suite, Apt. #, etc 27 City & State City & State Coral Gables, FC 28 City & State Coral Gables, FC 28 Country Zip Country Zip Country Zip Country Zip Country S. This corporation has liability for intangible tax under s. 199.032, | | | | | | | | | | | ₊ J iii | | | | | | | 411 |
|--|---|-------------------------------|--------------------------------------|-------------------------|--------------------------------|------------------------------------|--------------------------|--------|------------|----------|---------------------------------------|-------------|---|-----------------|------------|-------------------|-------------|--------------|
| 2. Procept Places of Business 3. Date Incorporated or Qualified 3. Date Custified 3. | Principal Place of Business Mailing Address | | | | | | | | | | | ***** | • •••• | | | #/#// #/#// #/# | | |
| 2. Principal Pillant of Business 3. Delse Incorporation and Consumers 3. Delse Incorporation of Supplies and | 2131 S.W. 27TH AVE | | | | CORAL GABLES FL 33114-4634 | | | | | | | | | | | | | |
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| Super, Apr. R. etc. Super, Apr. R. etc. | | | | 1.1- | 2a. Mailir | ng Address | | | | | 1 | | | | | | \pplie | d For |
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| Country 24 33 34 35 35 30 30 30 30 30 30 | Surte, Apt. (| #, etc | | | h | , Apt. #, etc. | | | | | 5. Certi | ficate of S | tatus Des | ired | | | | |
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| Salary 28 DADE 29 30 Florido Statutes Ves No | Zio | | | | | v v | Co | untry | | | · · · · · · · · · · · · · · · · · · · | ., | | alliby for it | | | | |
| B. Name and Address of Current Registered Agent AMOR, MIGUEL A. 2131 S.W. 27TH AVE MIAMI F. 33145 82 Sirent Address (P.O. Box Number is No! Acceptable) 83 International of the provision of Sections (RO. Color and 607:1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and metals when the relative with a consequence of the submits of the purpose of changing its registered office or registered agent, and metals with a consequence of the submits of the purpose of changing its registered office or registered agent, and metals with a consequence of the submits of the submits of the purpose of changing its registered office or registered agent and metals with a consequence of the submits of the submits of the submits of the submits as registered original agent and the submits of the submit | 33/ | 34 | | ADE | | | \vdash | Í | | | | | | | | | G. 100 | |
| 213 S.W. 27TH AVE MAMI FL 33145 BB City CORAL GABLES FL BS Zip Code 33 J ALAG GA AUE 11. Pursuant to the prevision of Spchony 807 0502 and 607 1508, Florida Statutes, the above-named corporation authmits this statement for the purpose of changing its registered agent 1 am fender witk, and increase with a statement for the purpose of changing its registered agent 1 am fender witk, and increase with a statement for the purpose of changing its registered agent 1 am fender witk, and increase with a statement for the purpose of changing its registered agent 1 am fender with a statement for the purpose of changing its registered agent 1 am fender with a statement for the purpose of changing its registered disputation. SIGNATURI WITH AMORE AND AMORE | 7.5.1 | 9. Name | and Address | of Current | | Agent | 1, | Ι | | | 10, Nam | e and Ad | dress of | New Res | platered | Agent | | |
| 2131 S.W. 27TH AVE MIAMI F. 33145 82 Sirvest Address (P.O. Box Number is Not Acceptable) 83 HALLAS A 84 City CoRAL GABLES FL 85 Zip Code 33 HALLAS A 11. Pursuant to titic provisions of Sactioning 607 (5502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered object of registered appear agree to the corporation board of directors. I hereby accept the appointment as registered object to an effect with a registered object 1 and familiar with a regi | AMO | R. MIGUE | L A. | | | | | 81 | Name | 9 | | | | | , | | | |
| 11. Pursuant to the provisions of Section (607 0600 and 607 1508, Florida Statute), the above-named composition submits this statement for the purpose of changing its registered object of circle of the infline State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered object of many of the infline State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered object of the infline state of Florida Statutes. 12. | | • | | | | | | P2 | Ctron | t Addio | oc (D O D | ov Muraba | r in Not A | scontab | | | | |
| 11. Fursion to the provisions of Scolory 802,0502 and 607,1508, Florids Statutes, the above-named control or registered apert, or jost in inflict of registered apert or jost, infline State of Florids, Such change was authorized by the corporation's board of directors. Interby accept the appointment are registered agent I am fermion with an an accept through disposance of Socione 607,0505, Florids Statutes. Manual State of Florids State of Florids Statutes | | | | | | | | 82 | Siree | 33 | iss (P.O. bi | ALA | GA | A | ΰE | | | |
| 11. Pursuant to the provisions of Socioris 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered appell, or John Kirch State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered appell and appell ap | ***** | | •• | | | | | 83 | * | | | | | | | | | |
| 11. Pursuant to the provisions of Socioris 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered appell, or John Kirch State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered appell and appell ap | | | | | | | | | A:: | | | | | | | 12-1 - | | |
| 11. Pressure to the provision of Science 607 (6507 and 607 (5005 Floridal Statutes, the above-hamed corporation submits this statement for the purpose of changing its rigistered affects or orgalized agent 1 am familiar with an incess through a special statute. Since of floridal Statutes is the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent and familiar with an familiar with an incess through a special set in appealation. At 19 ve 4. Amor 11 b. Press the transport of the proposed agent and set in appealation. At 19 ve 4. Amor 11 b. Press the transport of the proposed agent agent agent and set in appealation. At 19 ve 4. Amor 11 b. Press the transport of the proposed agent a | | | _ | | | | | 84 | City | Cok | 241 | GA | BLES | 5 . | Fl | _ 85 <u>41</u> |) Code | a U |
| SIGNATURE | 11. Pursuant t | to the provi | sions of Section | ns/607.0502 | 2 and 607.15(| 08, Florida Stat | utes, the | above | e-name | | | mits this s | tatement | for the p | urpose (| of changing | its re | gistered |
| SIGNATURE | office or re | egistered a | gert, or Joth, i | n the State | of Florida, Sud | ch change was | s authoriz Florida St | ed by | the co | rporatio | on's board | of directo | rs. I herek | у ассер | t the ap | pointment i | iger aı | stered |
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| CHY-ST-74P | | | | | | | | | r Annorces | | | | | | | | | |
| 6.17: 51-7/P 6.4.017: 51-7/P 1.4.1 do 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 annual topo for supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name | | | | | | | | | | · | | | | | | | | |
| information indicated on this annual ropor or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name | CITY-Si-ZIP | Su constitu H | est the inference | ioneulalia | d with this file | no does eet eu | 6.4 | CITY- | iI-ZiP | Letetad | in Section | 110 07/2 | (i) Florida | Statuta | e i fairth | er certify th | at the | |
| I am an officer or direction of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name | informatio | oy corniy tr ijj indicated | l on this annua | report or s | upplemental | annual report is | s true and | acc | urate ar | nd that | my signatu | re shall h | ave the se | ime lega | effect | as if made | ınder | oath, that |
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SIGNATURE: X

MIGUEL A. AMOR, M.D. 02/14/97 (305) 8602901

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Feb 21 1997 8:00am

Secretary of State