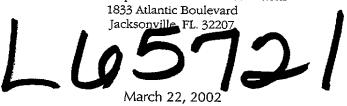
TASSONE & ELER

ATTORNEYS AT LAW A Partnership of Professional Associations

1833 Atlantic Boulevard

FRANK J. TASSONE, JR., P.A. REFIX W. ELER, P.A. M. BRAD GIBSON



PHONE (904) 396-3344 FAX (904) 396-0924 tassoneeler@hotmail.com

Secretary of State Division of Corporations Corporate Filings P. O. Box 6327 Tallahassee, Fl 32314

300005153853--03/25/02--01063--001 ****455.00 *****35.00

Re:

Registered Agent Changes

Dear Sir/Madam:

Enclosed please find the original Statement of Change of Registered Office or Registered Agent or Both for Corporations that has been completed for filing with your office with respect to the following corporations:

- Medical Equities Partners, Inc.; 1.
- 2. St. Augustine Surgery Center, Inc.;
- 3. Racquet Power, Inc.;
- 4. Salisbury Surgical Corporation, Inc.;
- 5. Beach Boulevard Surgery Center, Inc.:
- Paradigm Mandarin, Inc.; 6.
- 7. BJL PSC Holding Company;
- 8. Medical Partners Surgery Center, Inc.;
- 9. Emerson MOB, Inc.;
- 10. St. Augustine MOB, Inc.;
- 11. Medicus Women's Diagnostic Center Jacksonville, Ltd.;
- 12. Emerson MOB, Ltd.; and
- 13. MEP, L.C.

We are also enclosing our firm's check in the amount of \$455.00 representing payment for the change of Registered Agent fee for the above-referenced corporations.

Should you have any questions or require anything further from this office, please do not hesitate to contact us.

Sincerely,

FRANK TASSONE

FT/ytr



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida. 1. The name of the corporation: MEDICAL EQUITIES PARTNERS, INC.
2. The mailing address of the corporation: 1802 Largo Road
3. Date of incorporation/qualification: 4/17/90 Document number: L65721
4. The name and address of the current registered agent and office:
Brett J. Lewis
3390 Kori Road
Jacksonville, F1 32257
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Frank Tassone, Esquire
1833 Atlantic Boulevard
Jacksonville, Fl 32207
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
Malaris Mc Dewis 3/12/2003
(Signature of an officer, chairman or vice chairman of the board) (Date)
Doloris M. Lewis, Pres. (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
3/13/02
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Frank Tassone Registered Agent (Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)