File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

FILED
SECRETARY OF STATE

1999			Secretary of State DIVISION OF CORPORATIONS						
		99 APK 22 PH 2: 10							
and Mailing Add	dress DOC								
UNITED MEDICAL SERVICES LC									
1220 NORTH MARKET STREET, SUITE 606 WILMINGTON DE 19801						1220 NORTH MARKET STREET, SU WILMINGTON DE 19801			
2. Principal Place of Business			og Address	3. Date Organized or Qualified 3a. State of Formation					
Suite, Apt. #, etc.			. #, etc.	L		F.P.			
				4. FEI Number			Applied For		
City & State			ie	5 Date of Last Bones			Not Applicable		
-	Country	Zip	Cour	ntry	). Date of Cast Report		6. Certificate of Status Desired  S6 75 Additional Fee Requited		
Name and Address of Current Registered Age					Name and Address of N	New Registe	ered Agent/Offi	се	
CORPORATE CREATIONS , ENTERPRISES IN								j	
4521 PGA BOULEVARD #211  PALM BEACH FL 33418						O. Box Number is Not Acceptable)			
Suite, Apt. #, etc.									
City					FL Zip Code				
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations.									
JRE	(Business Assett Account	rec Assessations the	C114 Record to and American services	has received when the contains					
Managing Members/Managers		Business Street Address			City, State and Zip Code				
CROSHAW, PHILIP MARK THE A			THE AVENU	AVENUE		SARK CHANNEL ISLANDS			
GRASSICK, JAMES WILLIA LA COLLIN			1ETTE	s	ARK C	HANNEL	ISLANDS		
						-04/21	7/99 fiff	a18001	
	FEE Annu. 75 Ma and Mailing Added Liability Con UNITED REGIS 1220 NO WILMINO al Place of Bus  #, etc.  te  7. Name  ORATE ( PGA BC) BEACH  and to the provised office or regred agent, and  IRE  Mail  CROSHZ	FEE Annual Report \$100.0 75 Make Check Payable and Mailing Address red Liability Company DOC UNITED MEDICAL SE REGISTERED AGEN 1220 NORTH MARKET WILMINGTON DE 198 al Place of Business W, etc.  To Country  7. Name and Address of Curre ORATE CREATIONS PGA BOULEVARD #2 BEACH FI 33418  The office or registered agent, or both, in red agent, and accept the obligations.  THE THE ORDER OF THE ORDER O	FEE Annual Report \$100.00 + \$88.75 (75) Make Check Payable To: FLORII and Mailing Address red Liability Company DOCUMENT  UNITED MEDICAL SERVICES REGISTERED AGENTS LTD. 1220 NORTH MARKET STREET WILMINGTON DE 19801  al Place of Business 2a. Mailing Address of Current Registered  W. etc. Suite, Apt 7. Name and Address of Current Registered  Country Zip 7. Name and Address of Current Registered  PGA BOULEVARD #211  BEACH FL 33418  And to the provisions of Sections 608.416 and 608.508, red office or registered agent, or both, in the State of Floring agent, and accept the obligations.  RE (Ringestered Agent Accepting Appointment) (Ref. Managing Members/Managers)  CROSHAW, PHILIP MARK	THE Annual Report \$100.00 + \$88.75 Corporation Surports    The Make Check Payable To: FLORIDA DEPARTMENT    Beautiful Company    DOCUMENT # L980000    UNITED MEDICAL SERVICES LC    REGISTERED AGENTS LTD.    1220 NORTH MARKET STREET, SUITE (Control of Business    M. etc.    City & State    Country    The Make Check Payable To: FLORIDA DEPARTMENT    The Country    T	TEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  Make Check Payable To: FLORIDA DEPARTMENT OF STATE  and Mailing Address led Liability Company  DOCUMENT # L98000000438  UNITED MEDICAL SERVICES LC  REGISTERED AGENTS LTD.  1220 NORTH MARKET STREET, SUITE 606  WILMINGTON DE 19801  al Place of Business  2a. Mailing Address  #, etc.  Suite, Apt. #, etc.  Country  7. Name and Address of Current Registered Agent  Country  7. Name and Address of Current Registered Agent  Country  7. Name and Address of Current Registered Agent  DORATE CREATIONS , ENTERPRISES IN  PGA BOULEVARD #211  BEACH FL 33418  Suite. Apt. #, etc.  City  Street Address (F  Suite. Apt. #, etc.  City  Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  (Country Legistered Agent Address LC)  Suite Apt. #, etc.  City  Street Address (F  Suite. Apt. #, etc.  City  Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  (Country Legistered Agent, or both, in the State of Florida Statutes, the above-named limited effect office or registered agent, or both, in the State of Florida. Such change was authorized by affirma red agent, and accept the obligations.  RE  (Register of Agent Accepting Appendication (MOIL Fergature Agent Signature register) with a firm a red agent, and accept the obligations.  RE  (Register of Agent Accepting Appendication (MOIL Fergature Agent Signature register) with a firm a red agent, and accept the obligations.  Managing Members/Managers  Business Street Address	1999   DIVISION OF CORPORATIONS   99 APR	Suite	Second   Process   Proce	

indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address. M. faruccio, Attorney-in-fact for Philip M. Croshaw, Mngr

INHSE10 R (12-98)