

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M20905

1. Entity Name

SOUTH FLORIDA BLOOD SERVICES, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90038 042 ***158.75

Principal Place of Business

Mailing Address

% JOHN H. FLYNN
 933 45TH STREET
 WEST PALM BEACH FL 33407-2413

% JOHN H. FLYNN
 933 45TH STREET
 WEST PALM BEACH FL 33407-2413

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-0877825

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLYNN, JOHN H.
 933 45TH STREET
 WEST PALM BEACH FL 33407-0618

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

Signature, typed or printed name of registered agent and title if applicable.

(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.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 P
 NAME FLYNN, JOHN H
 STREET ADDRESS 933 45TH STREET
 CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VD
 NAME HUMBERTO, CORDERO
 STREET ADDRESS 933 45TH STREET
 CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE C
 NAME ARVIDSON, PHIL
 STREET ADDRESS 933 45TH STREET
 CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D
 NAME NIEHAUS, ROBERT
 STREET ADDRESS 933 45TH STREET
 CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP

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 all other like empowered.

SIGNATURE:

John H. Flynn 4-25-00 561-845-2323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

M20903

Attachment

728363

South Florida Blood Services, Inc.
Board of Directors

Chairman/Director
Phil Arvidson
933 45th Street
West Palm Beach, FL 33407

Vice Chairman
Humberto Cordero
933 45th Street
West Palm Beach, FL 33407

Secretary/Treasurer/Director
Benjamin Berges, M.D.
933 45th Street
West Palm Beach, FL 33407

Director
Robert Niehaus
933 45th Street
West Palm Beach, FL 33407

Director
Theodore Moffett
933 45th Street
West Palm Beach, FL 33407

Director
Joseph G. Kump, M.D.
933 45th Street
West Palm Beach, FL 33407

Director
Nick Navarro
933 45th Street
West Palm Beach, FL 33407

Director
Pascual Otazu
933 45th Street
West Palm Beach, FL 33407

Director
Laura South
933 45th Street
West Palm Beach, FL 33407

Director
Rob Holroyd
933 45th Street
West Palm Beach, FL 33407

4-00