2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 22, 2001 08:00 AM M25180 DOCUMENT # Entity Name **Secretary of State** UNIVERSAL AMERICAN FINANCE CORPORATION, I Principal Place of Business Mailing Address 730 NW 107 AVENUE C/O DAVID B. MCCAIN, ESQ. 700 NW 107TH AVE. MIAMI FL MIAMI FL 33172 33172 2. Principal Place of Business 3. Mailing Address 730 NW 107 AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For MIAMI FL 59-2631276 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33172 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCCAIN, DAVID B., ESQ. MCCAIN DAVID 700 NW 107TH AVE. Street Address (P.O. Box Number is Not Acceptable) 700 NW 107TH AVE. МІАМІ FLUS City Zip Code MIAMI 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. DAVID B. MCCAIN 01/22/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DVAS TITLE CR2E034 (11/00) ☐ Delete TITLE **X** Change ☐ Addition KAMINSKY, NANCY MAME NAME KAMINSKY NANCY 700 NW 107TH AVE. STREET ADDRESS STREET ADDRESS 730 NW 107TH AVE. CITY-ST-ZIP MIAMI FL 33172 CITY-ST-ZIP MIAMI TITLE DCP ☐ Delete TITLE X Change NAME PEKOR ALLAN J. NAME PEKOR ALLAN STREET ADDRESS 700 NW 107TH AVE. STREET ADDRESS 730 NW 107TH AVE. CITY-ST-ZIP MIAMI FL 33172 CITY-ST-ZIP MIAMI FL33172 Delete TITLE vs X Change ☐ Addition MODIST DEBRA NAME MODIST DEBRA STREET ADDRESS 730 N.W. 1007 AVE. STREET ADDRESS 730 N.W. 107 AVE. CITY-ST-ZIP MIAMI 33172 CITY-ST-ZIP МІАМІ FL. 33172 ☐ Delete TITLE DV **X** Change Addition REED NAME REED LINDA STREET ADDRESS 700 NW 107TH AVE. STREET ADDRESS 730 NW 107TH AVE. CITY-ST-ZIP МІАМІ 33172 CITY-ST-ZIP FLMIAMI 33172 TITLE VT Delete TITLE VTX Change ☐ Addition MUNOZ JANICE NAME MUNOZ JANICE STREET ADDRESS 700 NW 107TH AVE. STREET ADDRESS 730 NW 107TH AVE. CITY-ST-ZIP MIAMI 33172 CITY-ST-ZIP MIAMI FL33172 Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

01/22/2001

Daytime Phone #

Date

SIGNATURE: __Janice Munoz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR