FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

M99257

Principal Place of Business

FLORIDA DEPARTMENT OF STATI

Secretary of State

DIVISION OF CORPORATIONS

(1)

(1

FILED Feb 24 1998 8:00am Secretary of State

MEDIC	LAIM SERVICE, INC.				
Principal Plac	ce of Business	Mailing Address		a sadamati aim smith talta sada arah arah arah arah arah arah arah	II GIGII BIGII GIDH BIBII IDBI
927 TROPIC BLVD DELRAY BEACH FL 33483 US		PO BOX 788 Delray Beach Fl 33447-0788 US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
	AND THE RESERVE OF THE PARTY OF			09/19/1988	
	Place of Business	2a, Mading Address		4. FEI Number	Applied For
21		[26]		65-0078589	Not Applicable
Suite, Apt.	. #. etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	le	City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z _(D)	Country	8. This corporation owes or has paid the cr	
24	25	29	30	Personal Property Tax due June 30.	Yes No
 1	9. Name and Address of Curre	4 . 4	1001	10. Name and Address of New Registered	
GU	JRBUZ, GERALDINE	. *	81 Name		
927 TROPIC BLVD		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)		
DE	LRAY BEACH FL 33483		83		
			84 City	FI	85 Zip Code
11. Pursuant office or ragent 1 a	to the provisions of Sections 607 05 registered agent, or both, in the Stat am familiar with, and accept the obli	o2 and 607.1508, Florida Statut to of Florida. Such change was a galions of, Section 607.0505, Flo	es, the above-named corp authorized by the corporat orida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	
SIGNATURE	Signature, typiid or printed mene of requiremol a				
12.		ND DIRI CTORS	Fing stored Agent signature require 13.	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTODE IN 12
TITLE	PTD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	GURBUZ, GERALDINE		1.2 NAME		
STREET ADDRESS	927 TROPIC BLVD		1.3 STREET ADDRESS		i
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CITY-ST-ZIP		
TITLE	DEED TO SELECT	☐ DELETE	2.1 TIBLE		☐ Change ☐ Addition
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STREET ADDRESS			23 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY - ST - ZIP		
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		DELETE	3 1 TITLE		☐ Change ☐ Addition
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14. 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 annual report or supplienced innual 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 12 or Block 13 if changed, or on an altachment with an address.

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2/20/00