2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90635 019 ****70.00

D0056732

DOCUMENT # N99000005658

1. Entity Name

RAINBOW HEALTH COMMUNITY CARE GROUP CORP.

Principal Place of Business	Mailing Address
1250 SW 27th Ave, #207 Miami, FL 33135	1250 SW 27th Ave, #207 Miami, FL 33135

DO NOT WRITE IN THIS SPACE

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 65-0948293 ☐ 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
Raquel Carrion 2600 West 60th Street Hialeah, FL 33016	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 Raquel Carrion Raquel Carrion 4/24/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Richard Rodriguez 18906 NW 55 Avenue Miami, FL 33055	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Maria Elena Rodriguez 2602 West 60th Street Hialeah, FL 33016	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Michael Medina 5306 SW 153 Pl. So. Miami, FL 33185	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Armando J. Hernandez 10000 NW 80 Ct. Hialeah Gardens, FL 33016	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Roberto Rios 2600 West 60th Street Hialeah, FL 33016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Marilyn M. Medina 5306 SW 153 Pl. So. Miami, FL 33185	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Laura Fuentes 10000 NW 80th Ct. Hialeah Gardens, FL 33016	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Diana Cohen 17324 NW 76th Ct. Miami, FL 33015	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Lorraine Lebron 12800 SW 187th Street Miami, FL 33177	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/00)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Raquel Carrion Raquel Carrion 4/24/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

attachment #N99000005658 D00056732

COVELL, DIANA 17324 NW 76TH COURT MIAMI FL 33015	D

Annual Reports

Report Year	Filed Date	Intangible Tax
2000	05/23/2000	

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THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT

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