

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To: Division of Corporations
Fax Number : (850) 922-4000

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

RECEIVED
00 OCT 20 AM 10:30
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BASIC AMENDMENT

P.F. MEDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

FLORIDA DEPARTMENT OF STATE, JIM SMITH, SECRETARY OF STATE

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF FLORIDA
COUNTY OF DADE

I, Pastor Fuster after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

I, Pastor Fuster hereby resign as President of
(Title)
P.F. MEDICAL CENTER, INC. a Florida corporation;
(Name of Corporation)

That the corporation has been notified in writing of the resignation.
I understand that I am responsible for everything regarding this medical center prior to October 18, 2000. I will also file any taxes due until October 18, 2000.

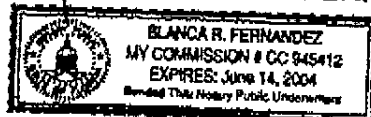


Signature of resigning officer/director,
PASTOR FUSTER

Sworn to and subscribed before me this 18 day of October 2000.

NOTARY PUBLIC BLANCA R. FERNANDEZ

My Commission Expires:



DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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