FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000043826

MEDICAL CONSULTING GROUP, IN



FILED Apr 30, 2004 8:00 am Secretary of State

04-30-2004 90236 020 ***150.00

	DO NO	r WRITE	IN THIS S	94074779					
Principal Place of Business 3. Mailing Address									
YIAT ESCONDITO CIR			P.O. Bux 20532						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
SARASOTA, FL			SARASOTA, FL					TA BUTE	
City & State	e		City & State			4. FEI Number		Applied For Not Applicable	
7:-	Co	untrv		Cour	to.	65-1004622			
Zip 3 Y 구 3		JSA.	3427C		SA_	5. Certificate of Status Desired [Fee Re	Additional quired	
alle in Shalter News			O sing year to read the part of the grant of the control of the co			Name and Address of Current Reg	istered Agent		
					Name M	ARK COLLINS, MO			
	. DO	NOTW	/RITE		Street Address (P.O. Box Number is Not Acceptable)				
					4127 ESCONDITO CIRCUS				
	IN	THIS SI	ALE		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
					City C A C		■ I Zip	Code	
	id — Son albert Garrella (d.) Ground de Statemann (d.)				SAR	ASOTA		34238	
8. The above	named entity subr	mits this statement f	or the purpose of changing i	its register	ed office or registere	ed agent, or both, in the State of Florida	. I am familiar v	vith, and accept	
the obligat	tions of registered a	agent							
SIGNATURE .	Signature, typed or printe	Tue	-> registere	ہے لہ	ent ren	naining regester	1 ege	nt	
	Signature, typed or printe	CONTRACTOR OF STREET STREET, STREET STREET, ST	(Automotive in applicable).	J1E; negistere	a Agent signature required	where remistating)	DATE		
	After May 1, Fed Amended UBF	e is \$550.00	f State			Election Campaign Financi Trust Fund Contribution.	~ ,	55.00 May Be added to Fees	
10.	THE PARTY OF THE P	OFFICERS AND	ORANGO SHENGANGO NAGONIAGO	#160m	e mar c. godernough - c.c., alignou			SACT SERVICE STREET, AND ALL AND A	
TITLE	Preside	nt		TITL				agrigor and a second of the se	
NAME		Collins, N	ND , CO	NAN	E		NACO CONTRACTOR		
STREET ADDRESS		Es condite		STR	ET ADDRESS	energia manda arabina sela sur series sur sela sela sela sela sela sela sela sela	が動物であり、 第15年であっているよう		
CITY-ST-ZIP		sote, FL		СПУ	-ST-ZIP		ngowenge i je - n is inte Alastowe i da tuta A	Asia da Santa da San Santa da Santa da Sa	
TITLE				FITL	E consecutive state of the contract of the con		tietes valetes laiki saliik Anasters valetes erika sali	San A Sire	
NAME				NAM	E.		Der John Higher der B. John der Greiber der	AND THE PROPERTY AND A	
STREET ADDRESS				STR	ET ADDRESS				
CITY-ST-ZIP				A CITY	-ST-ZIP			eric Cara de C	
TITLE				HTL	E	Part Commence of the Commence			
NAME	Ì			NAM	E .				
STREET ADDRESS				STR	ET ADDRESS	DO NOT W	/DITE		
CITY-ST-ZIP				CITY	-ST-ZIP	DO NOI W	of demokal managed block will be server.		
TITLE				TIR	E	IN THIS SE		12	
NAME				NAM	E .		AUL		
STREET ADDRESS				學學學	ET ADDRESS				
CITY-ST-ZIP		<u></u>		CITY	-ST-ZIP		4 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
TITLE				IIIL	E		计图像图象	The state of the s	
NAME				NAN	an and "随"的现在分词 "是一个人"。	The same of the sa	The second second		
STREET ADDRESS				34000	EET ADDRESS			AND THE STREET	
CITY-ST-ZIP				2598174 248874	'-ST-ZIP	en de la companya del companya de la companya de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya del companya de la companya del la companya	The second code	and the second of the second o	
TITLE				TITL			a to part of the light. The light of the lig		
NAME	1			NAN		eren men og en utskil særen en som en			
STREET ADDRESS	1			■ STR	EET ADDRESS		共和治 与祖母亲	A CONTRACTOR OF THE PARTY OF TH	

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

CHTY-ST-ZIP

SIC	NAT	TIDI	۳.
OIG		0171	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O