

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA 32302

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01/28/03--01036--022 利率150.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business
72 Prinewood Lane

Address
Same

Suite, Apt. #, etc

City & State Palm Beach Gardens, FL

City & State

4. FEI Number

4. FBI Number
105-1090716.

Applied For	
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Not Applicable

3 3410

Country U.S.

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name Manuela N Smith

Street Address (P.O. Box Number is Not Acceptable)
840 Jupiter Pk. Dr. #104

City JULIPITER

FL

Zip Code 33459

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.

Manuela N Smyth
Signature, typed or printed name of respondent, beginning with initials if applicable. (PWT)

Signature, typed or printed name of registrant or registrant's authorized representative

(NOTE: Program on Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee: \$150.00

After May 1, Fee Is \$550.00

Amended UBR is \$61.25

10. Election Campaign Financing.
Trust Fund Contribution.

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Mamuelo Neto Smyth 72 Princewood Lane Palm Beach Gardens, Fl. 33410	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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 a or on an attachment with an address, with all other like information.

Manuela Smith

Date: _____

Standing Room Only

CR2E034B (12/01)



DIABETES DIRECT

P.O. BOX 8950 JUPITER FL 33468-8950

PHONE 1(866)-868-8888 TOLL FREE

LOCAL (561)-746-6754

TO DIVISION OF CORPORATIONS

1/6/03

ATTENTION TYRONE SCOTT.

REFERENCE RE-INSTATEMENT OF DIABETES DIRECT INC.

DEAR MR. SCOTT,

TO CONFIRM TODAY'S CONVERSATION:-

DIABETES DIRECT FILED THE UBR ON TIME IN 2002 TOGETHER WITH THE CHECK FOR \$150. A COPY OF THE CANCELLED CHECK ATTACHED SHOWING DATE CLEARED BY DEPARTMENT OF STATE. APPARENTLY MANUELA SMYTH, PRESIDENT, FORGOT TO SIGN THE REGISTERED AGENT BOX.

WE RECEIVED NOTICE BACK TO DO SO AND DID SO. AGAIN COPY ATTACHED.

ATTACHED PLEASE FIND VARIOUS CERTIFIED LETTER RECEIPTS FOR THE DOCUMENTS.

I SPOKE TO A PERSON ON 7/2/ AT YOUR DEPARTMENT AND SHE STATED ALL WAS IN ORDER AND THAT THERE WERE NO LATE FEES ETC..

MRS. SMYTH SPOKE TO "LAURA" IN YOUR DEPARTMENT ON 7/12 AND SHE STATED " LETTERS HAD CROSSED IN THE MAIL AND THAT ALL WAS IN ORDER".

THEN WE RECEIVED A DOCUMENT OF DISSOLUTION FROM YOUR DEPARTMENT ON 10/21/2002. COPY ATTACHED. WE RESPONDED ON 10/22/2002 VIA FEDEX P1 TO 409 EAST GAINES STREET TALLAHASSEE FL 32399. IT WAS SIGNED FOR BY A. ANDREWS ON 10/23.

DIABETES DIRECT IS A MEDICARE PROVIDER AND WE URGENTLY NEED CONFIRMATION THAT WE ARE RE-INSTATED AS WE HAVE PATIENTS REQUIRING SUPPLIES. OTHER THAN ACCIDENTALLY FORGETTING A SIGNATURE WE HAVE DONE NOTHING WRONG. WE REALLY APPRECIATE YOU CORRECTING THE SITUATION IMMEDIATELY. AS MENTIONED IN OUR CONVERSATION I WILL CALL YOU TOMORROW TO CONFIRM YOU HAVE RECEIVED THIS PACKAGE AND ACTED ACCORDINGLY.

AS REQUESTED BY YOU TODAY, ENCLOSED PLEASE FIND A \$150 CHECK # 1156 FOR THE 20003 U.B.F.

SINCERE THANKS,

ROBERT SMYTH, ADMINISTRATOR