FILED
Apr 15, 2003 8:00 am
Secretary of State
04-15-2003 90109 045 ***160.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000091964

1. Entity Name
A & O MEDICAL CONSULTANTS, INC.

Principal Place of Business	Mailing Address
769 S.W. TULIP BOULEVARD PORT ST. LUCIE, FL 34953	769 S.W. TULIP BOULEVARD PORT ST. LUCIE, FL 34953

2. Principal Place of Business	3. Mailing Address
2938 E. Fontana Ct.	2938 E. Fontana Ct.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Royal Palm Beach, FL	City & State: Royal Palm Beach, FL
Zip: 33411 Country: Palm Beach	Zip: 33411 Country: Palm Beach

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1141575 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FAIR, PETER A
769 S.W. TULIP BOULEVARD
PORT ST. LUCIE, FL 34953

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Peter A. Fair 4/9/03
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when executing.) DATE

FILE NOW! A FEE IS $150.00. After May 1, 2003 fee will be $550.00. Make Check Payable to Florida Department of State.

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FAIR, PETER A 769 S.W. TULIP BOULEVARD PORT ST. LUCIE, FL 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Fair, Peter A 2938 E. Fontana Ct. Royal Palm Beach, FL 33411	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FAIR, DARLENE M 769 S.W. TULIP BOULEVARD PORT ST. LUCIE, FL 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Fair Darlene M. 2938 E. Fontana Ct. Royal Palm Beach, FL 33411	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Investment Consultant Marvin DelCid 2938 E. Fontana Ct Royal Palm Beach, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary DelCid, Mary E 2938 E. Fontana Ct. Royal Palm Beach, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Peter A. Fair 4/9/03 (561)333-1965
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #