

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90176 030 ***150.00

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DOCUMENT # P01000098971

1. Entity Name
D&C HEALTH SERVICES, INC.



Principal Place of Business
10511 NW 22ND ST
PEMBROKE PINES FL 33026

Mailing Address
10511 NW 22ND ST
PEMBROKE PINES FL 33026

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 65-1150038

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~PEGUERO, DOILA~~
10511 NW 22ND ST
PEMBROKE PINES FL 33026

Name
DOILA PEQUERO
Street Address (P.O. Box Number is Not Acceptable)
10511 N.W. 22 ST.
City
PEMBROKE PINES FL Zip Code
33026

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 *Doila Pequero*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

May 1, 2003
DATE

FILE NOW!!! 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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PEGUERO, DOILA**
CITY-ST-ZIP **10511 NW 22ND ST**
PEMBROKE PINES FL 33026

☒ Change ☐ Addition
TITLE
NAME **DOILA PEQUERO**
STREET ADDRESS **10511 N.W. 22nd ST.**
CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
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☐ Change ☐ Addition
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NAME
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CITY-ST-ZIP

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: *Doila Pequero*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1, 2003
Date Daytime Phone #

CR2E034 (10/02)

Attachment

80119320
#P01000098971

**D & C Health Services
10511 NW 22 Street
Pembroke Pines, Fl. 33026
(954) 937-1034**

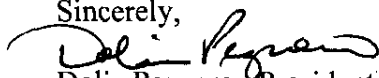
May 12, 2003

The Florida Dept. Of State: Division of Corporations,

I am writing this letter as an apology and as an explanation of why I am sending you the paperwork and payment for the filing of my Uniform Business Report for 2003 at this time. **I called the (850) 488-9000 number on the application today upon discovering that it was not due on May 15th as I had originally thought, but rather on May 1st.**

I spoke to customer service and I was extremely upset regarding the mistake I had made. She advised me to mail in the application and payment today with a letter explaining the situation. This is what I am doing right now. To be honest with you, the main reason why I think I got mixed up on the date is due to the fact that for approximately the past month and a half, both my parents who live with me and my husband, have gotten very ill. Being the only child, I have had to cope with a huge amount of numerous responsibilities and changes in our lives. I have missed a lot of work and to tell you the truth, the stress level has been extremely high for all of us, throughout this difficult time. I don't resent being there for my parents, after all, they have always been there for me, but it has been extremely difficult and I have lost track of many things that I normally take care of in a timely manner. I'm hoping that you will please accept my apology and my application at this time. Believe me, I have never been late with anything like this before and I assure you that, God willing, it will not happen again. If you have any questions or need to contact me for any reason, please don't hesitate to write me or contact me at the address or phone number above. Thank you so much for your understanding and help in resolving this manner. I am deeply grateful.

Sincerely,



Dolia Peguero, President of D & C Health Services