2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2005 08:00 AM Secretary of State

DOCUMENT # P01000106162 1. Entity Name OXY-CARE OF TAMPA, INC.					Secretary of State		
Principal Plac 3601 SWANN 102	I AVE	Mailing Address 3601 SWANN AVE 102				e sa e	
TAMPA, FL		TAMPA, FL 33609					
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Ð	O NOT WRITE I	N THIS S	PACE	04112005 4. FEI Number 65-115 5. Certificate		CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional	
	6. Name and Address of Current Reg	istered Agent			Table 1 States 1 States 1	Fee Required	
CAPOTE, YOHANY 3601 SWANN AVE 102 TAMPA, FL 33609				DO NOT WRITE IN THIS SPACE			
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Pegistered Agent signature required when reinstating). DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 OCCUPED AND DIRECTORS				\$5.00 May Be Added to Fees			
10. YITLE	OFFICERS AND DIR	ECTORS ==					
NAME STREET ADDRESS CITY-ST-ZIP	CAPOTE, YOHANY 3601 SWANN AVE, #102 TAMPA, FL 33609	· · · · · · · · · · · · · · · · · · ·			U00000 04/22/05	323306 80048-022 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			***************************************				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			——IN	THIS SF	PACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						- <u>124.55</u> g	
12. I hereby certify that the information supplied with its filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes if further certify that the information indicated on this report or supply figures and accurate and that my signature shall have the same legal effect as if made underloath, that I am an officer or director of the corporation or the receiver of 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 all other like empowered.							