## P01000112392

June 22, 2004

DEBIT MEMO ANNUAL REPORT DISSOLUTION NOTICE

900038167919

ANNUAL REPORT: SUNHEALTH MEDICAL & REHABILITATION CENTER, INC.

DEBIT MEMO: 44648-E,F,G

CHECK#'s: 1083,1084,1085



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 23, 2004

SUNHEALTH MEDICAL & REHABILITATION CENTER, INC. P.O. BOX 267591 WESTON, FL 33331

SUBJECT: SUNHEALTH MEDICAL & REHABILITATION CENTER, INC.

Debit Memo #: 44648-E,F,G

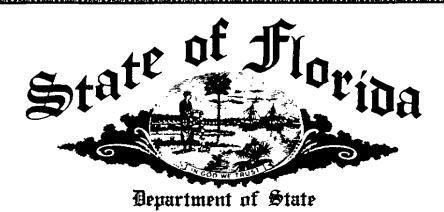
Document #: P01000112392

Due to your failure to respond to our letter advising you of your returned check and giving you 60 days notice of our intent to dissolve the above corporation, this corporation is now administratively dissolved.

A Certificate of Dissolution is enclosed.

Should you have any questions, please feel free to contact this office at (850) 245-6057.

Sincerely, Patricia Bailey Accountant II



## CERTIFICATE OF ADMINISTRATIVE DISSOLUTION

The provisions of section 607.1421 or 617.1421, Florida Statutes, which requires 60 days notice of a proposed dissolution, have been met for SUNHEALTH MEDICAL & REHABILITATION CENTER, INC., a corporation organized under the laws of the State of Florida. This corporation is hereby administratively dissolved as of June 22, 2004 for failure to file the required annual report(s), as required by law.

The document number of this corporation is P01000112392.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Twenty-third day of June, 2004

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Glenda E. Hood Secretary of State

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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 29, 2004

SUNHEALTH MEDICAL & REHABILITATION CENTER, INC. P.O. BOX 267591 WESTON, FL 33331

SUBJECT: SUNHEALTH MEDICAL & REHABILITATION CENTER, INC.

Ref. Number: P01000112392

Debit Memo #: 44648-E,F,G

This is to inform you that check #1083,1084,1085 dated DECEMBER 24, 2003 in the amount of \$450.00 submitted with the annual report/uniform business report for SUNHEALTH MEDICAL & REHABILITATION CENTER, INC. has been returned by your bank because of ACCOUNT CLOSED.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$495.00 made payable to the Department of State to cover the unpaid fees and service charge.

Section 607.1421 or 617.1421, Florida Statutes, requires at least 60 day notice of our intent to administratively dissolve or revoke your corporation for failure to file the annual report/uniform business report and pay the filing fee. Consider this your 60 day notice if the payment is not received, your corporation will be administratively dissolved or revoked on or after May 29, 2004 and a reinstatement fee of an additional \$600 will be imposed to reactivate the corporation.

Please send the replacement check to my attention at the address listed below.

If you have any questions concerning the filing of your document, please call (850) 245-6057.

Letter Number: 504A00020398

Patricia Bailey Accountant II