

# P0200004846

Requester's Name  
— *Conrad Associates*  
— *CONSULTANTS, INC.*  
— *P.O. BOX 940374*  
— *Miami, FL 33194-0374*

600007244136--7  
-08/21/02--01019--002  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

02 OCT 21 PM 3:00  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☒ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

August 26, 2002

CARR AND ASSOCIATES CONSULTANTS, INC.  
P.O. BOX 940374  
MIAMI, FL 33194-0374

SUBJECT: PROFESSIONAL HEALTH CARE CENTER OF CORAL GABLES, INC.  
Ref. Number: P02000048466

We have received your document for PROFESSIONAL HEALTH CARE CENTER OF CORAL GABLES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown  
Corporate Specialist

Letter Number: 302A00049898

RECEIVED  
SEP 02 10 10 AM '02  
DIVISION OF CORPORATIONS

*PLEASE NOTE, THAT THE INTENT IS NOT TO  
DISOLVE THE CORPORATION. INSTEAD,  
ONE OF THE CORPORATION'S  
SHAREHOLDERS WISHES TO SURRENDER  
HER POSITION AS A SHAREHOLDER.  
PLEASE MAIL BACK THE APPROPRIATE  
FORM.*

*Thank you*

*PLEASE MAIL TO  
CARR AND ASSOCIATES CONSULTANTS, INC  
P.O. BOX 940374 MIAMI FL 33194-0374*



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

September 16, 2002

CARR AND ASSOCIATES CONSULTANTS, INC.  
P.O. BOX 940374  
MIAMI, FL 33194-0374

SUBJECT: PROFESSIONAL HEALTH CARE CENTER OF CORAL GABLES,  
INC.  
Ref. Number: P02000048466

We have received your document for PROFESSIONAL HEALTH CARE CENTER OF CORAL GABLES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown  
Document Specialist

Letter Number: 702A00052699

RECEIVED  
02 OCT 15 AM 10:47  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

October 16, 2002

CARR AND ASSOCIATES CONSULTANTS, INC.  
P.O. BOX 940374  
MIAMI, FL 33194-0374

SUBJECT: PROFESSIONAL HEALTH CARE CENTER OF CORAL GABLES, INC.  
Ref. Number: P02000048466

We have received your document for PROFESSIONAL HEALTH CARE CENTER OF CORAL GABLES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person resigning from the corporation must sign the resignation.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown  
Document Specialist

Letter Number: 002A00057623

Isa Carreras  
491 East 23 Street Apt #3 Hialeah, Florida 33013  
Phone: (786) 512-1397

Division of Corporations  
P. O. BOX 6327  
Tallahassee, FL 32314

October 14, 2002

Subject: Professional Health Care Center of Coral Gables, Inc.  
Ref. Number: P02000048466  
Letter Number 702A00052699

To Whom It May Concern:

Enclosed please find Officer/Director Resignation proper form along with a copy of the letter sent with the instructions. Thank you for your attention to this matter.

Sincerely,



Isa Carreras

RECEIVED

02 OCT 21 PM 12:19

DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**OFFICER / DIRECTOR RESIGNATION**

**FILED**  
02 OCT 21 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, ISA CAYUGAS, hereby resign as SECRETARY  
(Title)

of PROFESSIONAL HEALTH CARE CENTER OF COIAL GABLES, INC.  
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**  
**Division of Corporations**  
**P.O. Box 6327**  
**Tallahassee, FL 32314**