

2,003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000078151
1. Entity Name
1010 MEDICAL SERVICE INC



FILED
03 OCT -9 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7159 WEST FLAGLER ST.
Suite, Apt. #, etc.

City & State
MIAMI, FLA.
Zip
33144

3. Mailing Address
7159 WEST FLAGLER ST.
Suite, Apt. #, etc.

City & State
MIAMI, FLA.
Zip
33144

4. FEI Number
02-0633972
Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent
Name
RANDY DIAZ
Street Address (P.O. Box Number is Not Acceptable)
7159 WEST FLAGLER ST
City
MIAMI
FL
Zip
33144

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 ☒ RANDY DIAZ
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE 10/03/03

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RANDY DIAZ 7159 W. FLAGLER MIAMI, FL 33144	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP JOEL R. HERNANDEZ 1315 LUDLAM DR. MIAMI SPRINGS, FL 33166	TITLE NAME STREET ADDRESS CITY - ST - ZIP	000023671180 10/09/03--01067--014 **158.75
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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 on an attachment with an address, with all other like empowered.
SIGNATURE: ☒ RANDY DIAZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DATE 10/03/03 (305) 264-9933
Daytime Phone #

CR2E034B (12/02)

October 5, 2003

DIVISION OF CORPORATION
UNIFORM BUSINESS REPORT
P.O.BOX 1500

Tallahassee, Fl. 32302-1500

SUBJECT 2,002 UNIFORM BUSINESS REPORT

Document # P02000078151

We would like to inform the Department of Corporation that we have not received in time the green page to update our corporation for the year 2,003. The new address is 7159 West Flagler Miami, Fl. 33144

We are requesting any waiver of penalties or interests and your deep understanding. Our Accountant question us about it and advise us to explain as soon as posible the missing document (2,003 U.B.R.) .

We are including the 2,003 U. B. R.(Blank copy) provided by our Accountant.
And the corresponding fee.

We need some understanding. Thanks

Sincerely;

X / RANDY DIAZ

Randy Diaz