2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000091109

Entity Name: METROPOLITAN HOME HEALTH NETWORK, INC.

FILED Apr 27, 2003 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 1550 N. FEDERAL HWY #14 BOYNTON BEACH, FL 33435 **New Mailing Address: Current Mailing Address:** 1550 N. FEDERAL HWY BOYNTON BEACH, FL 33435 FEI Number: 54-2076716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SEMEAH, YVES SEMEAH, YVES 7342 NW 48TH PL 1901 S. FEDERAL HIGHWAY LAUDERHILL, FL 33319 US US BOYNTON BEACH, FL 33435 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. SIGNATURE: YVES SEMEAH 04/27/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change (X) Addition SEMEAH, YVES Name: Name: 1901 S. FEDERAL HIGHWAY Address: Address: City-St-Zip: City-St-Zip: BOYNTON BEACH, FL 33435 US Title: () Delete Title: () Change (X) Addition MARTIN SEMEAH, ROMAINE Name: Name: Address: Address: 7507 GREENLAKE WAY B BOYNTON BEACH, FL 33436 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROMAINE MARTIN SEMEAH PRES 04/27/2003