FILED
Mar 14, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000128061

1. Entity Name
M.H.S. OF S. FLORIDA, INC.

Principal Place of Business	Mailing Address
4545 S.W. 132ND COURT MIAMI, FL 33175	4545 S.W. 132ND COURT MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE

03092005 No Chg-P CR2F034 (10/03)

4. FEI Number
14-1862940 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. **Name and Address of Current Registered Agent**

REED, THOMAS W
4545 S.W. 132ND COURT
MIAMI, FL 33175

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 ______________________ DATE ______

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	REED, THOMAS W
STREET ADDRESS	4545 S.W. 132ND COURT
CITY-ST-ZIP	MIAMI FL 33175
TITLE	
NAME	
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CITY-ST-ZIP	

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas W. Reed 3-11-05 305-799-1090
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #