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PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CAPP CARE, INC.

P25868

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FILED May 19 1998 8:00am Secretary of State



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11. Pursuant to the provisors of Sections CO7 (0.42 and CO7 14:08, Fiorida Statutes, the above-named coxporation submits this statement for the purpose of changing its registered agent. an travity in the State of Horida Statutes, the above-named coxporation's board of directors. I hereby accept the exponitment as registered agent and arminism with, and accept the expositiones of Sections (0.57,055, 1) and of Statutes. SIGNATURE 12. OF INCLES AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE CD DELETE 13 THE 12 NAME 13 NAME 14 NAME 15 NAME 15 NAME 15 NAME 16 CHANGES TO OFFICERS AND DIRECTORS IN 12. 16 Change Addition 17 NAME 18 STRETADORS NEWPORT BEACH CA 18 STRETADORS NEWPORT RICHEY CA 27 NAME 18 STRETADORS NEWPORT RICHEY CA 28 STRETADORS NEWPORT RICHEY CA 29 NAME 18 NEWPORT BEACH FL 20 NEWPORT BEACH FL 20 STRETADORS NEWS TOWER, 4000 MACARTHUR BLVD., #10000 30 STRETADO	PLANI	AHUN FL 33324			- -	_			· · · · · · · · · · · · · · · · · · ·			
11. Pursuant to the previsions of Sections 607 0507 and 607 1100, Florida Statutes, the above-paned corporation submits this statement for the purpose of changing its registered eight or trick, in the State of Honds State change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, an attaining with, and accept the edeligences of Section 607,005, floridad Statutes. SIGNATURE SUBMATURE 12. OFFICE ISSAND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICE ISSAND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. INTEL 2ALTA, EDWARD WEST TOWER, 4000 MACARTHUR BLVD., #10000 13. SINICI ADDRESS SIRRET ADDRESS MEWPORT BEACH CA 14. CITY ST 2P HENRY, MICHAEL PHENRY, MICHAEL PHENRY, MICHAEL 12. NAME 23. SIRRET ADDRESS NEWPORT RICHEY CA DELETE 27. NAME 24. CITY ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 35. SIRRET ADDRESS NEWPORT BEACH FL WEST TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRET ADDRESS DIV. ST 2P TOWER, 4000 MACARTHUR BLVD., #10000 36. SIRRE					la	3						
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6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with the 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 annual report or supplemental annual 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 region of the corporation of the corporat	NAME				6.2 NAME							:
14. Thereby 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 annual report or supplemental annual 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 require or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	STREET ADDRESS		A		6.3 STREE	I ADD	RESS					
indicated on this annual report or supplemental and in 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 corporation of the corporation	CITY-ST-ZIP	-	//									
officer or director of the comparation of the receiver for trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	indicated on t	his annual report or slubblementa	dfahelual rebart i	s true and acc	curate and f	hat m	v sionaturi	e shall.	ll have the came local offect as	s if marla urv	for nathe the	atlam an
	officer or direc	ctor of the corperation or the ruce	wuz or trustee e chnient with an a	mpowered <u>to</u>	execute this	герс	ort as requ	ired by	y Chapter 607, Florida Statule:	s; and that m	y name ap	pears in