FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998

· 牌位:接话

THE RESERVE



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000039852 (7)

FILED May 18 1998 8:00am Secretary of State

INTERN	NATIONAL CARE MAN	NAGEMENT CORP.				
Principal Place of Business		Mailing Address		# 1801084 110 30100 11111 00114 0014 00141 00101 01110 10101 01111	# \$184 JAM1	
25 SECOND ST N. 340 ST. PETERSBURG FL 33701 US		25 SECOND ST. N 340 ST. PETERSBURG FL 33701 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1993		
2. Principal P	Place of Business	2a. Mailing Address			plied For	
	16th Greet Noi		eet North		t Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired See Rec		
City & State 23 St. Petersburg, TL		City & State 28 St. Petershu	ng, FL	6. Election Campaign Financing \$5.00 Trust Fund Contribution Added to	•	
Zip 24 3370:	Country	7ip 29 33.705 30	Country	8. This corporation owes or has paid the current year Inta Personal Property Tax due June 30.	angible No	
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	10. Name and Address of New Registered Agent	
100 4TI	LDER, BENJAMIN D 2ND AVENUE SOUTH H FLOOR, NORTH TOWE . PETERSBURG FL 33701		83 84 City	Address (P.O. Box Number is Not Acceptable) 675 68th Avenue North, Stute (
11. Pursuant office or agent. I a	to the provisions of Sections registered agent, or both, in the familiar with, and accept the familiar by the section of the s	the State of Florida. Such change was auth the obligations of, Section 607.0505, Florid	the above-named norized by the corr la Statutes.	corporation submits this statement for the purpose of changing its poration's board of directors. I hereby accept the appointment as required when reinstating).	772 registered egistered	
12.	OFFIC	E HS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	3 IN 12	
TITLE	D	DELETE	1.1 TITLE	Change	Addition	

HUTTON, ELIZABETH 1.2 NAME STREET ADDRESS 25 2ND ST NORTH, SUITE 340 1.3 STREET ADDRESS 1213 16th Street North ST. PETERSBURG FL 33701 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP ☐ DELET€ 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

CIGNATURE.

4/21/08

(813) 894-5333