

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000049659**

Corporation Name
CHILDREN'S CARE WEST, P.A.

Principal Place of Business
**140 SAWGRASS CORPORATE PARKWAY
SUITE 106
SUNRISE FL 33325**

Mailing Address
**440 SAWGRASS CORPORATE PARKWAY
SUITE 106
SUNRISE FL 33325**

FILED
Jul 12, 1999 8:00 am
Secretary of State

07-12-1999 90013 025 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/15/1993	
4. FEI Number 65-0426592	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent ADLER, MITCHELL D. C/O MOMBACH, BOYLE & HARDIN P.A. 500 EAST BROWARD BLVD. FORT LAUDERDALE FL 33394		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) C/O Abrams Anton PA 83 2021 Tyler Street 84 City Hollywood FL 85 Zip Code 33022	
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I. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
OFFICERS AND DIRECTORS	
LE ME REET ADDRESS Y-ST-ZIP	0 MONTE-FERNANDEZ, ROSA 1053 POPLAR CR FT. LAUDERDALE FL <input type="checkbox"/> DELETE
LE ME REET ADDRESS Y-ST-ZIP	0 PAREDES, GILL 10251 SW 20TH STREET DAVIE FL <input type="checkbox"/> DELETE
LE ME REET ADDRESS Y-ST-ZIP	<input type="checkbox"/> DELETE
LE ME REET ADDRESS Y-ST-ZIP	<input type="checkbox"/> DELETE
LE ME REET ADDRESS Y-ST-ZIP	<input type="checkbox"/> DELETE
LE ME REET ADDRESS Y-ST-ZIP	<input type="checkbox"/> DELETE
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	0 MARTINEZ, Nestor J 410 NW 199 Avenue Pembroke Pines FL, 33029 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)