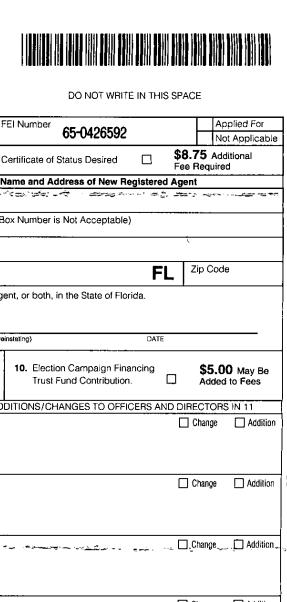
12002 UNIFORM BUSINESS REPORT (UBR)

P93000049659 **DOCUMENT #** 1. Entity Name CHILDREN'S CARE WEST, P.A. Principal Place of Business Mailing Address 440 SAWGRASS CORPORATE PARKWAY 440 SAWGRASS CORPORATE PARKWAY SUITE 106 **SUITE 106** SUNRISE FL 33325 SUNRISE FL 33325 2. Principal Place of Business 3. Mailing Address

FILED May 07, 2002 8:00 am Secretary of State

05-07-2002 90256 006 ***150.00



Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City 9 Stat	· · · · · · · · · · · · · · · · · · ·		O'ry 1 Oyy						
City & State			City & State		4.	4. FEI Number 65-0426592			Applied For Not Applicable
Zip		Country	Zip	Country	5.	Certificate of Status Desired	1 1	8.75 A ee Requi	dditional
		and Address of Current R				Name and Address of New R			
ADLER, MITCHELL D. C/O ABRAMS ANTON PA 2021 TYLER ST HOLLYWOOD FL 33022					Street Address (P.O. Box Number is Not Acceptable)				
								T 7:- 0-	
							FL	Zip Co	ode
SIGNATURE .		or printed name of registered agent an		Registered Agent sign			DATE		
Tax filing requirement and elects to do so. (See criteria on back)			• •	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of St		10. Election Campaign Fin Trust Fund Contribution			.00 May Be led to Fees
11.	1-2	OFFICERS AND D		12.	AC	DITIONS/CHANGES TO OFF	CERS AND	DIRECTO	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O MONTE-FERNANDEZ, ROSA 1053 POPLAR CR FT. LAUDERDALE FL			TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAREDES, GILL 10251 SW 20TH STREET			TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE	NA ST			NAME STREET ADORESS CITY-ST-ZIP	/	and the second s	مان المستوا	Change	Addition
TITLE NAME Street address City-St-Zip			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	: Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE IAME			☐ Delete	TITLE NAME STREET ADDRESS				Change	Addition