2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000073175

1. Entity Name

MEDIC. OS CORPORATION

Principal Place of Business	Mailing Address
877 EXECUTIVE CENTER DR W SUITE 303 ST PETERSBURG FL 33702	877 EXECUTIVE CENTER DR W SUITE 303 ST PETERSBURG FL 33702

2. Principal Place of Business 877 EXECUTIVE CENTER DR W	3. Mailing Address 877 EXECUTIVE CENTER DR W
Suite, Apt. #, etc. SUITE 303	Suite, Apt. #, etc. SUITE 303
City & State ST PETERSBURG FL	City & State ST PETERSBURG FL
Zip 33702 / Country US	Zip 33702 / Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3206725

Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MASCARA ERNEST L 877 EXECUTIVE CENTER DR W SUITE 303 ST PETERSBURG FL 33702 . US	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____   **04/25/2000**

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

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

11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS DURRETT SHARON J 8600 15TH LANE NORTH ST PETERSBURG FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS DURRETT SHARON J 8600 15TH LANE NORTH ST PETERSBURG FL 33702	☒ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DURRETT SCOTT P 8600 15TH LANE NORTH ST PETERSBURG FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DURRETT SCOTT P 8600 15TH LANE NORTH ST PETERSBURG FL 33702	☒ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DURRETT STEPHEN M 8600 15TH LANE NORTH ST PETERSBURG FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DURRETT STEPHEN M 8600 15TH LANE NORTH ST PETERSBURG FL 33702	☒ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen M Durrett   PRES   04/25/2000