2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 AM
Secretary of State

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Entity Name: MEDIC. OS CORPORATION

Current Principal Place of Business:

475 CENTRAL AVENUE
SUITE M-8
ST PETERSBURG, FL 33701 US

New Principal Place of Business:

THE KRESS BUILDING, SUITE M-8
475 CENTRAL AVENUE
ST PETERSBURG, FL 33701 US

Current Mailing Address:

475 CENTRAL AVENUE
SUITE M-8
ST PETERSBURG, FL 33701 US

New Mailing Address:

C/O ERNEST L. MASCARA, PA
475 CENTRAL AVENUE, SUITE M-8
ST PETERSBURG, FL 33701 US

FEI Number: 59-3206725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASCARA, ERNEST L
475 CENTRAL AVENUE
SUITE M-8
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

MASCARA, ERNEST L
THE KRESS BUILDING, SUITE M-8
475 CENTRAL AVENUE
ST PETERSBURG, FL 33701 US

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: _____ 04/23/2002
Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DURRETT, STEPHEN M
Address: 8600 15TH LANE NORTH
City-St-Zip: ST PETERSBURG, FL 33702 US

Title: DVP ( ) Delete
Name: DURRETT, SCOTT P
Address: 8600 15TH LANE NORTH
City-St-Zip: ST PETERSBURG, FL 33702 US

Title: DTS ( ) Delete
Name: DURRETT, SHARON J
Address: 8600 15TH LANE NORTH
City-St-Zip: ST PETERSBURG, FL 33702 US

Title: DVP ( ) Delete
Name: DURRETT, LEO
Address: 8600 15TH LANE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEO DURRETT VP 04/23/2002
Electronic Signature of Signing Officer or Director — Date