	NOW: FILING FEE	AFTER MAY 1S	T IS \$550.00	FIL	ED	
COR	PROFIT RPORATION		EPARTMENT OF STATE therine Harris	May 03, 19	999 8:00) am
•	JAL REPORT	C	cretary of State	Secretary		
. •	<u>1999 </u>	DIVISION	OF CORPORATIONS	05-03-1999 90046	5 050 ***150.00)
		00036346				
	LTHCARE, INC.					
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Principal Place	e of Business	Mailing Address				
	IOR DRIVE EACH FL 33409	13304 GLENMOOR D WEST PALM BEACH			THIS SPACE	
IS	· · · · ·	US	- · -	3. Date Incorporated or Qualifed 05/13/1994	1110 01 102]
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Appi	ied For
	BOX 2335	26 PO 8 Suite, Apt. #, etc	10X 2335	65-0498554	8.75 Ad	Applicable
Suite, Apt. 1	#, etc.	27	a. 	5. Certifcate of Status Desired	Fee Req	vired
City & State	UPITER, TL		ITER, FL	6, Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	
^{Zip} 33'	168 25 USA	29 33Ya	δ 30 ()SA	 This corporation owes the current ye Personal Property Tax. 		JNO
*	9. Name and Address of Cu			10. Name and Address of New Regist	tered Agent	
FRF	eman, alina		81 Name	·		
	11 PARIS ST.		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
COC	OPER CITY FL 32301		83			
				1 A A		Í
	· · ·		84 City		EI 85 Zip Co	de
11 Pursuant	to the provisions of Sections 607	0502 and 607,1508. Florida	Statutore the share normed on	rporation submits this statement for the purpo	FL	nistered
office or p	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the ol	itate of Florida, Such change i	Statutes, the above-named colors	rporation submits this statement for the purportion's board of directors. I hereby accept the	FL	nistered
office or re agent. I a	egistered agent, or both, in the S m familiar with, and accept the ol	Itate of Florida, Such change bligations of, Section 607,050	Statutes, the above-named co was authorized by the corpora 5, Florida Statutes.	tion's board of directors. Thereby accept the	FL	nistered
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SIGNATURE:

- 561-758-9222 Daylime Phone # 4/10/99 Date