SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/6/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 26 AM 8:57

DOCUMENT # P94000078252 (1)

1 Corporation Name

BLITCHTON COUNTRY CLUB, INC.

Principal Place of Business: 777 BRICKELL AVENUE SUITE 1114, MIAMI FL 33131

Mailing Address: 777 BRICKELL AVENUE SUITE 1114, MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3 Date Incorporated or Qualified: 10/25/1994

3a Date of Last Report

4 FEI Number — ✓ Applied For / Not Applicable

5 Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6 ☐ — $5.00 May Be Added to Fees

8 This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business / 2a. Mailing Address

21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MURTY, STEPHEN G ESQ
777 BRICKELL AVENUE SUITE 1114
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	MURTY, BOBBY
STREET ADDRESS	777 BRICKELL AVENUE SUITE 1114
CITY-ST-ZIP	MIAMI FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13.

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: *Bobby Murty* — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-25-95 Date — Daytime Phone #

0038068 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

DOCUMENT # P94000078530 (0)

RATTLER, LIONS & COMPANY

FIRST UNION CENTER
100 S. ASHLEY DR. SUITE 2000
TAMPA FL 33602

FIRST UNION CENTER
100 S. ASHLEY DR. SUITE 2000
TAMPA FL 33602

3. 10/24/1994

3a. N/A

4.

5. $8.75 Additional Fee Required

$5.00 May Be Added to Fees

6.

8. X

21 c/o David D. Ferrentino
22 100 S. Ashley Dr., Suite 2000
23 Tampa, Florida
24 33602 25 USA

9. Name and Address of Current Registered Agent

FERRENTINO, DAVID D
FIRST UNION CENTER
100 S. ASHLEY DR., SUITE 2000
TAMPA FL 33602

26 c/o David D. Ferrentino
28 Tampa, Florida
29 33602 30 USA

10. Name and Address of New Registered Agent

81
82 Street Address (no P.O. Box)
83
84 FL 85

11.

12.

13. ADDITIONAL OFFICER/DIRECTOR

P/S/T/D
Joseph Salerno, III
3345 Pinewalk Dr., Unit #4
Margate, FL. 33063

14.

SIGNATURE: 6/20/95 (305) 753-3452

SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR AUTHORIZED OFFICER OR DIRECTOR

Joseph Salerno, III, President

020011 CP

SECOND NOTICE CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95 $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

1995

DOCUMENT # P94000078697 (7)

GOOD CARE MEDICAL CENTER CORP.

9600 S W 8TH STREET
SUITE 35
MIAMI FL 33174

9600 S W 8TH STREET
SUITE 35
MIAMI FL 33174

10/26/1994

65-0529222

$8.75 Additional Fee Required

$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

NIETO, RODOLFO SR
9600 S.W. 8TH STREET
SUITE 35
MIAMI FL 33174

10. Name and Address of New Registered Agent

FL

PD
NIETO, RODOLFO SR
607 S.W. 97TH ST.
MIAMI FL 33174
SVTD
GONZALEZ, RAFAEL E
3365 S.W. 2ND STREET
MIAMI FL 33135

CR2E034 (3/95)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/20/95

0000400 CP