## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

**DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000089019 (1)

Suite, Apt. 4, etc.  City & State  City & State  City & State  City & State  Country  Added to Fee  Zip  Country  Zip  Country  Signature, Apt. 4, etc.  Country  Zip  Country  Signature, Apt. 4, etc.  Country  Zip  Country  Signature, Apt. 4, etc.  Signature, Apt. 4, etc.  Suite, Apt. 4, etc.  Suite, Apt. 4, etc.  City & State  City & State  City & State  Country  Signature, Apt. 4, etc.  Signatu	OPTIM/ Principal Place	ACARE MANAGEMENT COMI	Mailing Address						
### Principal Place of Business US  #### Place of Business US  #################################		KLAND PARK BLVD.						1	
US  3. Date Incorporated or Qualified 12/08/1994  2. Principal Place of Business 3. Date Incorporated or Qualified 12/08/1994  4. PEI Number 65-0567380  5. Use, Apt e. etc. 5. Sulte, Apt e. etc. 6. Certificate of Status Desired 65-0567380  5. Use, Apt e. etc. 6. Certificate of Status Desired 65-0567380  6. Election Campaign Financing 65-0567380  6. Certificate of Status Desired	FT.LAUDERDALE FL 33311 MAIMI FL 33169					DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE		
2. Principal Pince of Business 11 2 8 0 0 W 0 k lo 1 k lo									
2. Principal Piace of Business 11 2 8 0 0 W 0 k lo 1 k lo						12/08/1994			
Suite, Apt. 4, etc.    Suite, Apt. 4, etc.	2. Principal Pl	lace of Business	2a. Mailing Address	<del></del>			Ap	plied For	
Suite, Apt. 4, etc.    Suite, Apt. 4, etc.	1 2800 W. OOK 1012 ANTOW 26					65-0567360	No	t Applicable	
Trust Fund Contribution   Added to Fee	Suite, Apt. #, etc.					6. Certificate of Status Desired			
219   Country   219   Country   219   Country   219   Country   Response of the property Tax due June 30.   Yes   Personal Property Tax due June 30.   Yes   Pool   Pool   Personal Property Tax due June 30.   Yes   Pool   Poo	— <i>— L</i>	EAutertole, Fl	<b>├</b> ── '						
DAVID FREEDMAN  18441 N.W. 2ND AVENUE SUITE 218  MIAMI FL 33169  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 City  FL 85 Zip Code  86 City  FL 85 Zip Code  87 City  FL 85 Zip Code  88 City  FL 85 Zip Code  89 City  FL 85 Zip Code  89 City  FL 85 Zip Code  80 City  FL 85 Zip Code  80 City  FL 85 Zip Code  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 City Code  84 City  FL 85 Zip Code  85 Zip Code  86 City  FL 85 Zip Code  86 Zip Code  87 Code  88 City Code  88 City Code  89 City  FL 85 Zip Code  89 City  FL 85 Zip Code  89 City  FL 85 Zip Code  80 City  FL 85 Zip Code  80 City  FL 85 Zip Code  80 City Code  80 City Code  80 City Code  81 City  FL 85 Zip Code  81 City  FL 85 Zip Code  82 City Code  83 City Code  84 City  FL 85 Zip Code  85 Zip Code  86 Zip Code  87 City Code  88 Zip Code  89 Zip Code  89 Zip Code  89 Zip Code  80 Zip Code  8	Zip	, h	<u></u> —¬ '		ntry				
1841 N.W. 2ND AVENUE SUITE 218 MIAMI FL 33169  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  86 City FL 85 Zip Code  87 City FL 85 Zip Code  88 City FL 85 Zip Code  89 City FL 85 Zip Code  89 City FL 85 Zip Code  80 City FL 85 Zip Code  80 City FL 85 Zip Code  80 City FL 85 Zip Code  81 City FL 85 Zip Code  82 City FL 85 Zip Code  83 City Code  84 City FL 85 Zip Code  85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  86 Zip Code  87 City FL 86 Zip Code  86 Zip Code  87 City FL 86 Zip Code  87 City FL 86 Zip Code  88 Zip Code  89 City FL 86 Zip Code  80 City FL 87 Zip FL 88 Zip Code FL 88		9. Name and Address of Current I	Registered Agent			10. Name and Address of New Regi	stered Agent		
SUITE 218 MIAMI FL 33169  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 regist 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 registed agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature. hyped or printed name of registered agend and title if Applicable  (NOTE Registered Agent signature required when reinslating)  DATE  12. OFFICERS AND DIRECTORS  ITIRE  PRES  DELETE  1. ITIRE  WALLIN, BRUCE  1.3 STREET ADDRESS  3830 S.W. 2 COURT  1.3 STREET ADDRESS  STREET ADDRESS  3830 S.W. 2 COURT  1.4 Offty-ST-ZIP  FT. LAUDERDALE FL  DELETE  1.4 Offty-ST-ZIP  STREET ADDRESS  1144 S.E. 3RD AVE  CITY-ST-ZIP  FT. LAUDERDALE FL  DELETE  2.4 CITY-ST-ZIP  SEC  DELETE  3.1 TIRE  SEC  CITY-ST-ZIP  FT. LAUDERDALE FL  Change  CA  STREET ADDRESS  3.1 STREET ADDRESS  STREET ADDRESS  3.1 STREET ADDRESS  STREET ADDRESS  4740 N. STATE ROAD 7, Suite 210  FT. LAUDERDALE FL  STREET ADDRESS  GTY-ST-ZIP  FT. LAUDERDALE FL  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  STREET ADDRESS  GTY-ST-ZIP  FT. LAUDERDALE FL  STREET ADDRESS  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  Change  CTY-ST-ZIP  CHANGE  3.3 STREET ADDRESS  FT. LAUDERDALE FL  STREET ADDRESS  ADDITIONS/CHANGES TO OFFICERS  CTY-ST-ZIP  CHANGE  STREET ADDRESS  ADDITIONS/CHANGES TO OFFICERS  ADDITIONS/CHANGES TO OFFICERS  AD	DA'	MD FREEDMAN		ľ	81 Name				
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Signature. Appead or printed name of registered agent and title if applicable  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  PRES  DELETE  1.1 TITLE  NAME  WALLIN, BRUCE  STREET ADDRESS  3830 S.W. 2 COURT  TITLE  VP  TITLE  VP  DELETE  1.4 CITY-ST-ZIP  TITLE  WARE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  2.1 TITLE  Change  AME  STREET ADDRESS  CITY-ST-ZIP  TITLE  SEC  JOHN SZIVOS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  TITLE  SEC  JOHN SZIVOS  4740 N. STATE ROAD 7, SUITE 210  STREET ADDRESS  CITY-ST-ZIP  FT. LAUDERDALE FL  3.3 STREET ADDRESS  2.4 CITY-ST-ZIP  STREET ADDRESS  STR		to the provisions of Sections 607.0502 agistered agent, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statu Florida Such change was ons of, Section 607.0505, Fl	tes, the ab authorized orida Stati	ove-named by the con ites.	corporation submits this statement for the pur poration's board of directors. I hereby accept to	pose of changing its he appointment as	s registered registered	
THE PRES DELETE 1.1 TITLE  NAME WALLIN, BRUCE STREET ADDRESS 3830 S.W. 2 COURT 1.3 STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL  TITLE VP NAME BESNER, HILDA F STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL  ZOUTH-ST-ZIP  TITLE SEC NAME JOHN SZIVOS STREET ADDRESS GITY-ST-ZIP FT. LAUDERDALE FL  ZOUTH-ST-ZIP  SEC STREET ADDRESS CITY-ST-ZIP TITLE SEC NAME JOHN SZIVOS STREET ADDRESS TOWN ROW					Agent elgnature				
NAME  WALLIN, BRUCE  \$12 NAME  \$13830 S.W. 2 COURT  \$1.3 STREET ADDRESS  \$1.4 CITY-ST-ZIP  TITLE  WP  DELETE  \$2 I TITLE  NAME  BESNER, HILDA F  \$144 S.E. 3RD AVE  \$1144 S.E. 3RD AVE  \$17 LAUDERDALE FL  TITLE  \$2 NAME  \$2 NAME  \$2 NAME  \$3 STREET ADDRESS  \$2 L CITY-ST-ZIP  TITLE  \$5 C  NAME  JOHN SZIVOS  \$3 STREET ADDRESS  \$4740 N. STATE ROAD 7, SUITE 210  \$3.3 STREET ADDRESS  \$4740 N. STATE ROAD 7, SUITE 210  \$3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  \$4. L Q L L L L L L L L L L L L L L L L L						ADDITIONS/CHANGES TO OFFICE			
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CITY-ST-ZIP  FT. LAUDERDALE FL  TITLE  VP  MAME  BESNER, HILDA F  STREET ADDRESS  CITY-ST-ZIP  TITLE  SEC  MAME  JOHN SZIVOS  STREET ADDRESS  4740 N. STATE ROAD 7, SUITE 210  STREET ADDRESS  CITY-ST-ZIP  FT. LAUDERDALE FL  1.4 CITY-ST-ZIP  22 NAME  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  SEC  STREET ADDRESS  4740 N. STATE ROAD 7, SUITE 210  3.3 STREET ADDRESS  4740 N. STATE ROAD 7, SUITE 210  THE STREET ADDRESS  4740 N. STATE ROAD 7, SUITE 210  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  1.4 CITY-ST-ZIP  Change  AND  AND  AND  AND  CHANGE  C	1								
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CITY-ST-ZIP  FT. LAUDERDALE FL  2.4 CITY-ST-ZIP  TITLE  SEC  NAME  JOHN SZIVOS  STREET ADDRESS  4740 N. STATE ROAD 7, SUITE 210  STREET ADDRESS  CITY-ST-ZIP  FT. LAUDERDALE FL  2.4 CITY-ST-ZIP  3.1 TITLE  S.E.C.  STOVE ROA: H  Change  A740 N. STATE ROAD 7, SUITE 210  3.3 STREET ADDRESS  4740 N. STATE ROAD 7, SUITE 210  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  Change  A740 N. STATE ROAD 7, SUITE 210  3.3 STREET ADDRESS  GTY-ST-ZIP  FT. LAUDERDALE FL  Change  A740 N. STATE ROAD 7, SUITE 210  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  Change  A740 N. STATE ROAD 7, SUITE 210  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL  Change  A740 N. STATE ROAD 7, SUITE 210  3.4 CITY-ST-ZIP  FT. LAUDERDALE FL									
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HAME JOHN SZIVOS STREET ADDRESS 4740 N. STATE ROAD 7, SUITE 210 CITY-ST-ZIP TITLE TRE  JOHN SZIVOS  32 NAME STREET ADDRESS 4740 N. STATE ROAD 7, SUITE 210 3.3 STREET ADDRESS 34 CITY-ST-ZIP FT. LAUDERDALE FL  JOHN SZIVOS  32 NAME STRUE ROAD 7, SUITE 210 3.3 STREET ADDRESS 4740 N. STATE ROAD 7, SUITE 210  CITY-ST-ZIP TITLE  JOHN SZIVOS  CITY-ST-ZIP THE JOHN SZIVOS			M DELETE			SEL	Change	Addition	
STREET ADDRESS 4740 N. STATE ROAD 7, SUITE 210  CITY-ST-ZIP FT. LAUDERDALE FL  TITLE TRE  DELETE 41 TITLE  Change  A740 N. STATE ROAD 7, SUITE 210  CHANGE  A740 N. STATE ROAD 7, SUITE ROAD 7, SUI			Jet seein			Steve Renit	4.346	Perfection	
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NAME FREEDMAN, DAVID 4.2 NAME		• • • • • • • • • • • • • • • • • • • •	Las vection						
STREET ADDRESS 1841 N.W. 2ND AVENUE SUITE 218 4.3 STREET ADDRESS			F 218						

6.4 CITY - ST - ZIP 14. 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 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

61 TITLE 6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

MIAMI FL

DELETE

DELETE

(305)653-8288

☐ Change

Addition

☐ Addition

**FILED** 

May 08 1998 8:00am

Secretary of State