COF	PROFIT RPORATION JAL REPORT 1996	Sai Se DIVISION	DEPARTMENT indra B. Morth ecretary of Sta N OF CORPO	nam ate				
orporation	n Name	00089167	(8)					
TOTAL	L CARE MEDICAL CENTER	r, inc.						
	e of Business SET DR SUITE 350 3173	Mailing Address 10300 SUNSET DR SUITE 350 MIAMI FL 33173			 3. Date Incorporated or Qualified 38. Date of Last Report 			
rincipal Pl	lace of Business	2a. Mailing Address	3 -		12/08/1994 4. FEI Number		05/01/19	95 Applied For
FOFOW. FLAGLER		57 26 5260 W. FLAGIER 55. Stille, Apt. #, elc.			65-0541229			Not Applicable Additional
ity & Stati	<i>I- B</i>	City 8 State	4		5. Certificate of Status Desi 6. Election Campaign Finan			Required O May Be
nin	mi, fh	28 MIAN	<u> </u>	42	Trust Fund Contribution		Adde	d to Fees
3315	Country 25	29 33144	1 30	ountry		🗋 Yes 🛣 No)	199.032,
	9. Name and Address of Curr	ent Registered Agent		81 Name	10. Name and Address of	New Register	ed Agent	
	ia, sergio Sunset dr. Suite 350			82 Street Add	fress (P.O. Box Number is Not Ac		<u>۲</u>	
MIAMI	FL 33173			83 50	ire 1.L			
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