

P95000013232

Mary Ann Rizzo  
3200 NE 14th Street  
Pompano Beach, FL 33062

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

100004478231--5  
-07/16/01--01121--002  
\*\*\*\*\*35.00 \*\*\*\*\*35.00  
100004478231--5  
-07/31/01--01009--003  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

- ☐ Walk in ☐ Pick up time  
☐ Mail out ☐ Will wait

☐ Photocopy

- ☐ Certified Copy  
☐ Certificate of State

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

01 AUG '03 PM 2:41

FILED

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 20, 2001

MARY ANN RIZZO  
3200 NE 14TH STREET  
POMPAÑO BEACH, FL 33062

SUBJECT: NATIONWIDE HOME HEALTH SERVICES, INC.  
Ref. Number: P95000013232

We have received your document for NATIONWIDE HOME HEALTH SERVICES, INC. and check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$52.50. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

**CORPORATIONS BASIC FEES**

Profit and NonProfit  
Florida & Foreign Corp.

Filing Fees	\$35.00
Registered Agent	
Designation	\$35.00
Certified Copy	\$8.75

Certified Copy of any record \$8.75  
plus a \$1 per pageover 8 pages not to exceed \$52.50

Reinstatement  
Profit corp. \$600.00  
Non Profit Corps. \$175.00  
Annual Report/Uniform Business Report \$61.25  
plus Supplemental Fee of \$88.75 (profits only)

Articles of Correction	\$35.00
Revocation of Dissolution	\$35.00
Dissolution & Withdrawal	\$35.00
Amendment of any record	\$35.00

DIVISION OF CORPORATIONS

01 JUL 30 AM 8:22

RECEIVED

Certificate of Status	\$ 8.75
Foreign Name Registration	\$87.50
Foreign Name Renewal	\$87.50
Merger	\$35.00 for each party
Substitute Service of process (Chapter 48)	\$8.75
Registered Agent Change	\$35.00
Registered Agent Resignations	
Active Corporations	\$87.50
Inactive Corporations	\$35.00
Resignation of Officer/Director	\$35.00
Trade & Service Marks	\$87.50 per class
Trade & Service Marks Renewals	\$87.50 per class
Trade & Service Mark Assignments	\$50.00

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Doug Spittler  
Document Specialist

Letter Number: 201A00042557

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, MARY ANN RIZZO  
(Name of registered agent)

hereby resigns as Registered Agent for NATIONWIDE HOME HEALTH SERVICES, INC.  
(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Mary Ann Rizzo  
(Signature of resigning agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314