DEBIT MEMORANDUM

TO: DEPT. OF STATE FOR OFFICIAL USE

DATE

NUMBER

1.13 99

92179

STATE

TREASURER FLORIDA

* FUND	AMOUNT	REASON RETURNED	***** KEY		****	***
** * GENERAL REVENUE		INSUFFICIENT FUNDS		 1	-* *	-
* TRUST	1,613.75	ACCOUNT CLOSED		2	-* *	2
* OTHER *		UNCOLLECTED FUNDS		3	*	
* TOTAL *******	- 1,613.75	OTHER		4	*	

CROSS REF	DISTRIBUTION SAMAS CODE	REASON	TRUOMA
012	45-20-2-130001-45300000-00-000100-00	2 —	35.00
012	45-20-2-130001-45300000-00-000100-00	1	78.75
012	45-20-2-130001-45300000-00-000100-00	1	750.00
012	45-20-2-130001-45300000-00-000100-00	3	750.00

GRAND TOTAL:

\$ 1,613.75

92179-C

400002795544---

RECEIVED

JAN 14 1999

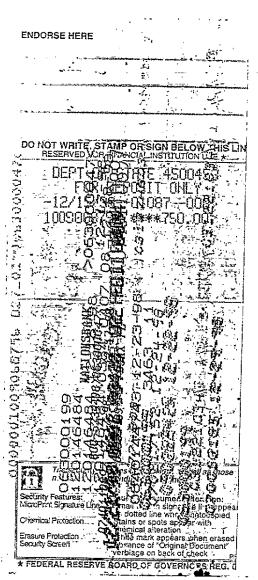
DIV. OF ADMIN. SERVICES HUMAN RESOURCES

Process Date: 12/29/98

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

Ctoto Omenance

1351 00 18-57-80 THO MUNICIPAL NATIONAL BANK Superior Februaries (2009) SUNCOAST CIRCULATORY CENTER, INC PH. 813-792-0969 , , 2010 - 59TH ST., W., SUITE 4200 BRADENTON, FL 942094 PAY TO THE ORDER OF





FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 3, 1999

Suncoast Circulatory Center, Inc. 7412 6th Ave., NW Bradenton, FL 34209

SUBJECT: SUNCOAST CIRCULATORY CENTER, INC.

Ref. Number: P95000017600

Debit Memo #: 92179-C

This is to inform you that your check #1351 dated November 16, 1998 in the amount of \$750.00 and submitted for SUNCOAST CIRCULATORY CENTER, INC. has been returned to us by your bank because of Nonsufficient funds.

We request that you remit a cashier's check or money order in amount of \$787.50 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 199A00004795



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 5, 1999

Suncoast Circulatory Center, Inc. 7412 6th Ave., NW Bradenton, FL 34209

SUBJECT: SUNCOAST CIRCULATORY CENTER, INC.

Ref. Number: P95000017600

Debit Memo #: 92179-C

Due to your failure to respond to our previous letter advising you of the returned check #1351, the Reinstatement for SUNCOAST CIRCULATORY CENTER, INC. has been cancelled and is considered not filed as of March 5, 1999.

The status of your corporation has now reverted to its previous status of administratively dissolved or revoked.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 499A00010411