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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P95000041085 (8)

MED CARE MANAGED HEALTH CENTERS, INC.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Principal Place of Business Mailing Address 600 WEST 20TH STREET 600 WEST 20TH HIALEAH FL 33010 HIALEAH FL 330								Date Incorporated or Qualified 3a. Date of Last Report					
2. Principal P	lace of Busine	95S						05/2	24/1995			, casi i	Пероп
1			2a. Mailing Address			4.	4. FEI Number					Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				45-0583932					Not Applicat		
2			27	0.01			5.	Certificate	of Status Desire	ed [7		5 Additional
City & State 3	0		City & State				6.	Election C	ampaign Financi				Required
Zip		Country	28	···					d Contribution	"'9 []		00 May Be ed to Fees
4]	}	25	Zip [29]		Country		8.	This corpo	oration has liabilit	y for inta	ingible tax i	under s	199.032.
		and Address of Currer	nt Registered Agent	30	— _T —-			Florida Sta	atutes 📙	Yes [No		100.0021
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