

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000052966 (5)

1. Corporation Name
CARE CENTRAL PLUS, INC.

Principal Place of Business

5405 NW 102 AVENUE
SUITE 201
SUNRISE FL 33351

Mailing Address

5405 NW 102 AVENUE
SUITE 201
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/10/1995

4. FEI Number
65-0700162

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

PEMBERTON, RANDOLPH
3935 NW 73 AVE.
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 registered office or registered agent or both, in the State of Florida. Such change is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am not a director and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Randolph Pemberton* - RANDOLPH PEMBERTON - PRESIDENT 4/10/98-954-742-0263
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	PRESIDENT
NAME	PEMBERTON, RANDOLPH	1.2 NAME	RANDOLPH PEMBERTON
STREET ADDRESS	3935 NW 73 AVE.	1.3 STREET ADDRESS	7272 WEST OAKLAND PARK BLVD.
CITY-ST-ZIP	LAUDERHILL FL 33319	1.4 CITY-ST-ZIP	LAUDERHILL FL-33313
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 registered professional 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 designated with an address.

SIGNATURE: *Randolph Pemberton* - RANDOLPH PEMBERTON 4/10/98-954-742-0263

CR2E034 (10/97)