[3/27/98

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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DIVISION OF CORPORATIONS TO:

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FROM: GEIGER, KASDIN, HELLER & KUPERSTEIN, P.A. CONTACT: BEVERLY O RIEDY

ACCT#: 076030000723

FAX #: (305)372-0052

PHONE: (305)372-5000

NAME: QPQ MEDICAL CENTERS, INC. AUDIT NUMBER..... H98000005998

DOC TYPE......REGISTERED AGENT CHANGE

PAGES.....

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FA# H98-5998 Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: <u>OPO MEDICAL CENTERS</u> , INC.
2. The mailing address of the corporation is: 2627 N.E. 203rd Street, Suite 213
MIAMI, FLORIDA 33180
3. Date of incorporation/qualification: Document number: P95000066055 4. The name and address of the current registered agent and office:
MITCHELL RUBINSON
1000 LINCOLN ROAD, SUITE 206
MIAMI, FLORIDA 33139
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
MICHAEL LINDE
2627 N.E. 203rd STREET, SUITE 213
MIAMI, FLORIDA 33180
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
3/23/98
(Signature of an officer, chairman or vice chairman of the board) (Date)
MICHAEL LINDE, President/Shareholder/Director/Registered Agent (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
3/23/98
(Signatur) of Registered Agent) (Date)
Stanley H. Kuperstein, Esq.

Stanley H. Kuperstein, Esq. 1428 Brickell Avenue, 6th Floor Miami, Florida 33131 Telephone: (305) 372-5000 Florida Bar Number: 113612 FA# H98-5998

FILING FEE: \$35.00