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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000067453 (7)

FLORIDA GERIATRIC COUNSELING CENTERS, CORP.

Principal Place of Business 8535 NW 7 AVENUE

Mailing Address

5535 NW 7 AVENUE

FILED Jan 29 1997 8:00am Secretary of State



Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Tip Country Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Top Country 8. This corporation has liability for intangible tax under s. 199.032,	MIAMI PL 33127	MIAMI FL 33127-1401						
SUBJA P. F. ofc. 20				08/31/1995 10		·		
SURE ADMENS SINCE ADMENS SUBJECT ADMINISTRATIONS SINCE ADMINISTRA	2. Principal Place of Business	2a. Mailing Address	, , ,					Applied For
SURE ADMENS SINCE ADMENS SUBJECT ADMINISTRATIONS SINCE ADMINISTRA	21 5545 NW /AVE	. 26 5545 NW	/ / A	٧ د.	65-0614106			Not Applicable
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Manual M	City & State 23 MIAMI FLORIDA	City & State 28 MIAMI F	Loai	DA				
Manual M	Zip Country 24 37127-140125 DADE	29 33 127.1401 3	Country O A	DE				der s. 199.032,
HAND IN ELECTION STREET MIAMI SHORES FL 33138 BY BY City FL BS Z prode The pursuant to the provisions of Sections 607 (060) and 607,1508, 1 forth Statutes, the above named corporation submits this statement for the pursose of changing its registered office or registered agent. or both, in the State of Territic Such change was authorized by the corporation submits this statement for the pursose of changing its registered agent. In minimizar with, and accept the onlightness of, Section 607 (050), Flored Statutes. SIGNATURE SIGNATURE DISTRICT STATE OF LICERS AND DIRECTORS IN 12. THE PDS MANUEL E III 12 NAME SIMERIADORSS DIVERSE AND STREET 13 SIREIT ADORSS DIVERSE AND STREET 14 AND 105 STREET 15 SIREIT ADORSS DIVERSE AND STREET DELETE D	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	gistered A	gent	
MIAMI SHORES FL 33138 B3	MENENDEZ, III, MANUEL E		81	Name				
STREET ADDRESS DELETE DE			82	Street Adi	dress (P.O. Box Number is Not Acceptable	le)		
11. Pursuant to the provisions of Sections 607 05:02 and 607 11:08. Hondra Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, it am familiar with, and accept the obligations of Section 607 05:05. Florida Statutes. SIGNATURE Signature Speed or provide sense life as send agent and better as showed. The statutes of the provisions of Sections 607 05:05. Florida Statutes. SIGNATURE Signature Speed or provide sense life as send agent and better as showed. The statutes of the statutes of the statutes of the statutes. The statutes of the statutes of the statutes of the statutes. The statutes of the statutes of the statutes of the statutes. The statutes of the statutes of the statutes of the statutes of the statutes. The statutes of the s	MIAMI SHORES FL 33138		83				<u> </u>	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE	·		84	City	CONTRACTOR OF PARTY CONTRACTOR OF THE CONTRACTOR	EI	85	Zip Code
office or registered agent, or both, in the State of Floridis, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and recept the obligations of Section 607 605, Florida Statutes. Signature	11. Pursuant to the provisions of Sections 607.0502	and 607.1508. Florida Statutes	the abov	L e-named co	rporation submits this statement for the pr		chang	ing its registered
Signature species precised and enterprises appealance ((the) signature species and enterprises ((the) signature species ((the) signature species (office or registered agent, or both, in the State of	if Florida. Such change was aut	thorized b	y the corpor	ation's board of directors. I hereby accep	t the appo	ointme	nt as registered
TITLE		and tele it applicable (NO): 1	Registered Ag	enl signature req	uired when reinstating)	DATE		
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