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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000089828 (4)

SPECIALIZED	PATIENT CARE, INC.												
Principal Place of Busine	SS	Mailing Address											
17290 NE 19TH AVE. NORTH MIAMI BEACH	17290 NE 19TH NORTH MIAMI B		2										
						3.	Date Incorpo	rated or Quali	ified	3a. Dal	e of Last	Report	
							11/21/19	995					
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Suite, Apt. #, etc.		Suite, Apt. #, e	tc.			5.	Certificate of	Status Desire	d			<b>5</b> Addition	
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Gity & State		City & State				6.	Election Camp		ng			<b>00</b> мау і	
Zip	Country	Zip	Co	ountry			Trust Fund Co					ed to Fee	
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9. Nam	ne and Address of Current I			Τ_		10.	Name and A				Agent		
				81	Name					<del>-</del>			
POTTER, KATHE	RINE			82	Street A	iddress (P	O. Box Numbe	or is Not Acce	antable	X			
17290 NE 19TH							O. DOX 110/110/	or is mot Acce	Splaule	7			
NORTH MIAMI B	EACH FL 33162			83									
				84	City						laëT-	7 - O- #-	
				1 1	City					FL	85 2	Zip Code	
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