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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

# DOCUMENT # P95000089837 (5)

PACIFICARE CASE MANAGEMENT INC.

Principal F	lace of	Business
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Mailing Address

13701 N KENDALL DR. SUITE 305 MIAMI FL 33186 13701 N KENDALL DR. SUITE 305 MIAMI FL 33186-1309

# FILED Jul 21 1997 8:00am Secretary of State

|--|--|--|--|--|

!							3.	11/27/1995		te of Last <b>08/1996</b>	
2. Principal Pi	ace of Business	2a. Mailing	Address				4.	FEI Number 65-0635427	4	<u> </u>	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, A	pt. #, etc.				5.	Certificate of Status Desired			Additional Required
City & State	9	City & S	State				6.	Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip	Country	Zip		Country	У		B.	This corporation has liability for i	ntangible	tax under	s. 199.032,
24	25	29		30		<del></del>	<u></u> .	Florida Statutes	<b>1</b>	No	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9. Name and Address of Currer	it Registered Ag	jent	81	т		10.	Name and Address of New Re	pistered A	.gent	
	TO, MARIA C			61	'	Name					
13701 N KENDALL DR, SUITE 305 MIAMI FL 33186			82	82 Street Address (P.O. Box Number is Not Acceptable)							
(VIII.A)	WILL AND INC.			83	3					·	
				84	+	City			FL	85 Zip	p Code
11. Pursuant t	o the provisions of Sections 607.050 agistered agent, or both, in the State	2 and 607.1508, of Horida, Such	Florida Statu change was	ites, the above authorized b	νe- Τ_	named corporate	oratio on's t	n submits this statement for the popular	urpose of	changing	its registered
agent. I ar SIGNATURE	n familiar with, and accept the oblig	ations of, Section	607.0505, F	lorida Statute	s.					•	
	Signature, typed or printed name of registered age		( <b>N</b> O	TF: Registered Ag	joni	il signature require			DATE	DIDEOTE	
12.	OFFICERS AN		DELETE	13.				ADDITIONS/CHANGES TO OFFIC			
TITLE	PVST	·	DELETE	1.1 TITLE						☐ Change	e 🔲 Addition
NAME	PRIETO, MARIA C	005		1.2 NAME							
STREET ADDRESS	13701 N KENDALL DR, SUITE	305		1.3 STREET	TA	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33186			14 CITY-5	ST-	- ZIP					
TITLE	D	ı	DEFELE	2.1 101LE		ļ			1	Change	Addition
NAME	PRIETO, MARIA C			2.2 NAME							
STREET ADDRESS	13701 N KENDALL DR, SUITE	305		2.3 STREET	TA	ADDRESS		le le			
CITY-ST-ZIP	MIAMI FL 33186			2. 4 CITY -	S1	I - ZIP					
TITLE			DELETE	3.1 TITLE						☐ Change	Addition
NAME				3.2 NAME							
STREET ADDRESS				3 3 STREET	I A	ADDRESS					
CITY-ST-ZIP				3.4. CITY-	· \$1-	1- ZIP					
TITLE			DELETE	4.1 TITLE						Change	Addition
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREET	1 A	ADDRESS					
CITY-ST-ZIP				4.4 CITY - S							
TITLE			DELE TE	5 1 TITLE		<del></del>				Change	Addition
NAME		•	_	52 NAME							
STREET ADDRESS				53 STREET	T 44	unnotee					
CITY-ST-ZIP TITLE			DELETÉ	5.4 CITY - 5 6.1 TITLE	۱۰ اڼ	- 114				Change	Addition
		•	DELLIE						,	onunge	- House
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREET		1					
CITY-ST-ZIP		2 M.C. (E.) - 40	1 · · · · ·	6.4 CITY- S			100 0	olion 440 07/0V/1 51-1-1-1 04 1	11	nastit st	-1 dl -
information information ham an of appears in	by certify that the information supplie in indicated on this annual report or s ficer or director of the corporation or in Block 12 or Block 1211 changed, o	u with this tiling c supplemental and the receiver or to r on all attachme	rues not qual rual report is rustee empor nt with an ad	iny for the executive and accommodate wered to execution to executions.	eni cut	rate and that rate this report	my si as re	gnature shall have the same logal quired by Chapter 607, Florida S	effoct as tatutes; an	if made u id that my	त्र ताछ inder oath; tha / name

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1997



FLORIDA DEPARTMENT OF STATE

### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

PACIFIC Principal Plac	ALL DR. SUITE 905		ITE <b>30</b> 5						
				3. Date Incorporated or Qualified 11/27/1995	3a. Date of Last Report 04/08/1996				
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For				
Suite, Apt.	# olc	Suite, Apt. #, etc.		65-0635427	Not Applicable  \$8.75 Additional				
22	n, 0to.	27		5. Certificate of Status Desired	Fee Required				
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be				
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees				
24	25	}ı	30	8. This corporation has liability for Florida Statutes	Intangible lax under s. 199.032,  Yes DNo				
	9. Name and Address of Curre			10. Name and Address of New Ro	gistered Agent				
	ETO, MARIA C		81 Nam	e					
	01 N KENDALL DR, SUITE 305		<b>B2</b> Stree	at Address (P.O. Box Number is Not Accepta	ble)				
MIA	MI FL 33186		83						
			84 City		<b>85</b> Zip Code				
					FL				
SIGNATURE	Signature, typed or printed harve of registered ag	ont and pille if applicable (NOTE	Registered Agent's gnat	ed corporation submits this statement for the proporation's board of directors. I hereby acceuse importance when rehisting)	DATE				
12.	OFFICERS AN	ID DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12  Change Addition				
TITLE NAME	PRIETO, MARIA C	□ brees	1.1 TILLE 1.2 NAME		El change El Addition				
STREET ADDRESS	13701 N KENDALL DR, SUITE	305	1.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY - ST - 789						
TITLE	D	☐ DELETE	2.1 TITUE		Change Addition				
NAME OXEGET ADDRESS	PRIETO, MARIA C 13701 N KENDALL DR, SUITE	: 205	2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33186	. 000	2.4 CITY-ST-ZIP						
TITLE		DELETE	3 1 TillE		Change Addition				
NAME			3.2 NAME						
STREET ADDRESS			3 3 STREET ADDRESS	S					
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-7/P 4.1 TITLE		Change Addition				
NAME			4. 2 NAME						
STREET ADDRESS	4		4.3 STREET ADDRESS						
CITY-ST-ZIP	······································		4.4 CITY - S1 - ZIP						
TITLE		DELETE	5.1 TOLE	· ·	Change Addition				
NAME CTREET ADDRESS			5.2 NAME						
STREET ADDRESS City-St-Zip			5.3 STREET ADDRESS 5.4 CITY+S1-ZiP	)					
TITLE		DELLIE	6.1 NILE		Change Addition				
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						

14. I do 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 received or trusted 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 on an attachment with an address.