

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 13, 2000 08:00 AM
Secretary of State

DOCUMENT # P96000003311

1. Entity Name
 MEDICALL, INC.

Principal Place of Business 3350 ULMERTON RD SUITE 1 CLEARWATER 33762 US	FL	Mailing Address 3350 ULMERTON RD SUITE 1 CLEARWATER 33762 US	FL
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2. Principal Place of Business 3350 ULMERTON RD	3. Mailing Address 3350 ULMERTON RD
Suite, Apt. #, etc. SUITE 7	Suite, Apt. #, etc. SUITE 7

City & State CLEARWATER FL	City & State CLEARWATER FL
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Zip 33762	Country US	Zip 33762	Country US
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4. FEI Number 59-3350217	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CONTINO RICHARD
 3350 ULMERTON RD
 SUITE 1
 CLEARWATER FL
 33762

7. Name and Address of New Registered Agent

Name
 CONTINO RICHARD
 Street Address (P.O. Box Number is Not Acceptable)
 3350 ULMERTON RD
 SUITE 7
 City
 CLEARWATER FL Zip Code
 33762

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE **04/13/2000**
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	CONTINO JEAN	
STREET ADDRESS	3350 ULMERTON ROAD, SUITE 1	
CITY-ST-ZIP	CLEARWATER FL 33707	
TITLE	D	<input type="checkbox"/> Delete
NAME	CONTINO RICHARD J	
STREET ADDRESS	3350 ULMERTON ROAD, SUITE 1	
CITY-ST-ZIP	CLEARWATER FL 33707	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CONTINO JEAN		
STREET ADDRESS	3350 ULMERTON ROAD, SUITE 7		
CITY-ST-ZIP	CLEARWATER FL 33762		
TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CONTINO RICHARD J		
STREET ADDRESS	3350 ULMERTON ROAD, SUITE 7		
CITY-ST-ZIP	CLEARWATER FL 33762		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN CONTINO

04/13/2000