FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1998**

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

FILED
98 APR 27 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000015611 (2)**

1. Corporation Name
CARE AMERICA INTEGRATED HEALTH SERVICES, INC.

Principal Place of Business
210 N. WEST MONTE DR
SUITE 1002
ALAMONTE SPRINGS FL 32714
US

Mailing Address
% ROBERT B. HAGHGOU
340 N. SPAULDING COVE
HEATHROW FL 32746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/20/1996

2. Principal Place of Business
21 210 N. Westmont Dr.
Suite, Apt. #, etc. 22 Suite 1002
City & State 23 Altamonte Springs, FL
Zip 24 32714 Country 25 US

2a. Mailing Address
26 210 N. Westmont Dr.
Suite, Apt. #, etc. 27 Suite 1002
City & State 28 Altamonte Springs, FL
Zip 29 32714 Country 30 US

4. FEI Number: 59-3362755 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
HAGHGOU, ROBERT B
340 N. SPAULDING COVE
HEATHROW FL 32746

10. Name and Address of New Registered Agent
81 Name: Corporation Service Company
82 Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
83
84 City: Tallahassee FL 85 Zip Code: 32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Karen B. Rozar — **Karen B. Rozar, As Its Agent** — 4-27-98
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	HAGHGOU, ROBERT B	
STREET ADDRESS	340 N. SPAULDING COVE	
CITY-ST-ZIP	HEATHROW FL	
TITLE	STD	☒ DELETE
NAME	HAGHGOU, HUSHANG	
STREET ADDRESS	619 MORGAN STREET	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	VD	☒ DELETE
NAME	MAYER, MICHAEL J	
STREET ADDRESS	824 CAMARGO WAY APT 101	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CFO / Sec.	☐ Change ☒ Addition
1.2 NAME	Arthur Kobain	
1.3 STREET ADDRESS	1803 S Congress Ave 400	
1.4 CITY-ST-ZIP	Boynton Beach FL 33426	
2.1 TITLE	Pres. & Director	☐ Change ☒ Addition
2.2 NAME	Paul Peaches	
2.3 STREET ADDRESS	1803 S Congress Ave 400	
2.4 CITY-ST-ZIP	Boynton Beach FL 33426	
3.1 TITLE	CEO	☒ Change ☐ Addition
3.2 NAME	Robert B Haghgou	
3.3 STREET ADDRESS	340 N. Spaulding Cove	
3.4 CITY-ST-ZIP	Heathrow, FL	
4.1 TITLE	Exec. V.P.	☒ Change ☐ Addition
4.2 NAME	Michael J Mayer	
4.3 STREET ADDRESS	824 Camargo Way Apt 101	
4.4 CITY-ST-ZIP	Altamonte Springs, FL	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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****150.00 ****150.00

14. 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 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 receiver or trustee 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.

SIGNATURE: [illegible] — CEO — 4-27-98

CR2E034 (10/97)