## 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 # P96000019691 (0)

VITAL CARE SERVICES INC.

Principal Place of Business Mailing Address

## FILED May 07 1997 8:00am Secretary of State



Solity A State   20	30025 SW 153RD COURT LEASURE CITY FL 33030		30025 SW 153RD COURT LEASURE CITY FL 33033-3617					
Sulfie, Apt #, etc.    25   Sulfie, Apt #, etc.						03/04/1996	3a. Date of Last	Report
Solition	2. Principal Pl	lace of Business	2a, Mailing Address				Applied For	
City & State  Ci	21		<del></del>					
20	22		27		5. Certificate of Status Desired			
Name and Address of Current Registered Agent	23	e 	<del>                                     </del>					
ROJAS, OLGA 30023 SW 15SRD COURT LEASURE CITY FL 30030  11. Pursuant to the provisions of Sections 607 0509 and 607 1508 librarial for registered agent, or both, in the State of finded. Such change was activated by the corporation submite this statement for the purpose of cheraging is registered agent, and armitine with, and accept the chigations of, Section 607 0505, Floridal Statutes.  SIGNATURE    Purpose   Pu	Zip 24	· · · · · · · · · · · · · · · · · · ·	h - 1	· 1	y ,,	Florida Statutes	Yes 🔲 No	s. 199.032,
## BZ Street Address (P.O. Box Number is Not Acceptable)  ## BZ Street Address (P.O. Box Number is Not Acceptable)  ## City FL   85 Zip Code  ## Cit		9. Name and Address of Current	Registered Agent	]	1	10. Name and Address of New Reg	gistered Agent	
RASURE CITY FL 33030				81	Name			
11. Pursuant to the provisions of Sections 607 (602 mint 607 1608 foliations Statutes, the above represent submits this statement for the purpose of changing its registered agent, in the State of florids. Such change was authorized by the corporation's board of directors. Thereby accept the oppositionent as registered agent, in the State of florids. Such change was authorized by the corporation's board of directors. Thereby accept the oppositionent as registered agent, in above, represent a corporation's board of directors. Thereby accept the oppositionent as registered agent, in above, represent a corporation's board of directors. Thereby accept the oppositionent as registered agent, in above, represent a corporation's board of directors. Thereby accept the oppositionent as registered agent, in a corporation's board of directors. Thereby accept the oppositionent as registered agent, in a corporation's board of directors. Thereby accept the oppositionent as registered agent, in a corporation of directors. Thereby accept the oppositionent as registered agent, in a corporation of directors. Thereby accept the oppositionent as registered agent, in the Statute.  12.						ress (P.O. Box Number is Not Acceptab	le)	
1. Pursuant to the provisions of Sections 607.0602 and 607.1508   fields Statutes, like above remind corporation submits this statement for this purpose of changing its registored agent, or both, in the State of froids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registored agent and mainter with, and accept the obligations of Section 607.0505, Florida Statutes.    1				83	1			
The present to the provisions of Sections 607 06029 and 607 1508   Floridal Statutes, like above remored corporation submitle this statement for the purpose of changing all registeror agent. I am familiar with, and accept the obligations of, Section 607 0505. Floridal Statutes.    Signature				В4	City		FL 85 70	o Code
	office or r	egistered agent, or both, in the State of	of Florida. Such change was au	thorized b	y the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing It the appointment a	ils registered as registered
18.   ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12								
THILE   PTD				<b>■</b>	ent signature requi			200 11 12
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LEASURE CITY FL 33030				Į.	T ADDRESS			
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<b>■</b>								ļ
	CITY-ST-ZIP							į

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 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.