

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000040759

1. Corporation Name

21ST CENTURY HOME HEALTH INVESTMENT CORPORATION

Principal Place of Business

Mailing Address

2100 E. Hallandale Beach Blvd. (Same as place of  
Suite 206 business)  
Hallandale, FL 33009

200002892172--2

-06/02/99--01032--003

DO NOT WRITE IN THIS SPACE \*\*\*158.75 \*\*\*158.75

3. Date Incorporated or Qualified

May 6, 1996

2. Principal Place of Business

Beach

2a. Mailing Address

Beach

2100 E. Hallandale Blvd. 26 2100 E. Hallandale Blvd.

Suite, Apt. #, etc.

Suite 206

Suite, Apt. #, etc.

Suite 206

City & State

Hallandale, FL

City & State

Hallandale, FL

Zip

33009

Country

U.S.

Zip

33009

Country

U.S.

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

Yes

No

9. Name and Address of Current Registered Agent

CEDRIC STRAKER  
2100 E. Hallandale Beach Blvd.  
Suite 206  
Hallandale, Florida 33009

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

Cedric Straker

5/17/99

SIGNATURE

Signature, typed or printed name of registered agent and true if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D/P  
NAME CEDRIC STRAKER  
STREET ADDRESS 2100 E. Hallandale Beach Blvd.  
CITY-STATE-ZIP Hallandale, FL 33009 206

TITLE D/VP  
NAME CYNTHIA LEWISON  
STREET ADDRESS 2100 E. Hallandale Beach Blvd.  
CITY-STATE-ZIP Hallandale, FL 33009

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-STATE-ZIP

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-STATE-ZIP

31 TITLE D/S/T  
32 NAME STELLA MARK  
33 STREET ADDRESS 5110 Jefferson Street  
34 CITY-STATE-ZIP Hollywood, FL 33021

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-STATE-ZIP

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 as an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CEDRIC STRAKER, President 5/17/99 (954) 455-3533

Date

Daytime Phone #

CR2E034 (11/98)

FROM : SELECT SERVICES HOME CARE

PHONE NO. : 954 455 2664

May. 28 1999 11:24AM RZ <sup>2012</sup>



**Select Services  
Home Care**

May 28, 1999

The Florida Department of The Division  
Of Corporation  
Tallahassee, Florida 32308

Dear Sir/Madam:

I understand that the 1999 Annual Report was due on May 1<sup>st</sup>, 1999; however, our Office did not receive the preprinted form from you.

After talking with our Attorney, we are submitting the report along with payment of \$158.75. Please excuse us of having to pay the additional penalty

Thank you

Sincerely,

Cedric Straker  
President

cc: File  
Attorney Stanley B. Lewis