


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

FILED
Mar 05 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 | |  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | |
| DOCUMENT # P96000059822 (2) 1. Corporation Name MIAMI DADE HOME HEALTH AGENCY, INC. | | | |
| Principal Place of Business 80 S.W. 8TH STREET SUITE 2300 MIAMI FL 33130 | | Mailing Address 80 S.W. 8TH STREET SUITE 2300 MIAMI FL 33130 | |
| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country | |
| 3. Date Incorporated or Qualified 07/17/1996 | | 4. FEI Number 65-0680716 | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Name and Address of Current Registered Agent GOLDNER, SOLOMON 80 S.W. 8TH ST. 23RD FLOOR MIAMI FL 33130 | |
| 9. 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 | | 10. Name and Address of New Registered Agent | |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | |
| 12. OFFICERS AND DIRECTORS | | | |
| TITLE | D | <input type="checkbox"/> DELETE | |
| NAME | BURDETTE, WILLIAM R | | |
| STREET ADDRESS | 80 S.W. 8TH ST. | | |
| CITY-ST-ZIP | MIAMI FL 33130 | | |
| TITLE | CD | <input type="checkbox"/> DELETE | |
| NAME | GOLDNER, SOLOMON | | |
| STREET ADDRESS | 80 S.W. 8TH STREET, 23RD FLOOR, STE 2300 | | |
| CITY-ST-ZIP | MIAMI FL 33130 | | |
| TITLE | VCD | <input checked="" type="checkbox"/> DELETE | |
| NAME | WEISS, HOWARD | | |
| STREET ADDRESS | 80 S.W. 8TH STREET, 23RD FLOOR, STE 2300 | | |
| CITY-ST-ZIP | MIAMI FL 33130 | | |
| TITLE | D | <input type="checkbox"/> DELETE | |
| NAME | FOGELMAN, SAM | | |
| STREET ADDRESS | 80 S.W. 8TH STREET, 23RD FLOOR, STE 2300 | | |
| CITY-ST-ZIP | MIAMI FL 33130 | | |
| TITLE | D | <input type="checkbox"/> DELETE | |
| NAME | GORT, WIFREDO | | |
| STREET ADDRESS | 80 S.W. 8TH STREET, 23RD FLOOR, STE 2300 | | |
| CITY-ST-ZIP | MIAMI FL 33130 | | |
| TITLE | D | <input type="checkbox"/> DELETE | |
| NAME | PEREZ, JOE | | |
| STREET ADDRESS | 80 S.W. 8TH STREET, 23RD FLOOR, STE 2300 | | |
| CITY-ST-ZIP | MIAMI FL 33130 | | |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | |
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 1.2 NAME | | | |
| 1.3 STREET ADDRESS | | | |
| 1.4 CITY-ST-ZIP | | | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 2.2 NAME | | | |
| 2.3 STREET ADDRESS | | | |
| 2.4 CITY-ST-ZIP | | | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 3.2 NAME | | | |
| 3.3 STREET ADDRESS | | | |
| 3.4 CITY-ST-ZIP | | | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 4.2 NAME | | | |
| 4.3 STREET ADDRESS | | | |
| 4.4 CITY-ST-ZIP | | | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 5.2 NAME | | | |
| 5.3 STREET ADDRESS | | | |
| 5.4 CITY-ST-ZIP | | | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 6.2 NAME | | | |
| 6.3 STREET ADDRESS | | | |
| 6.4 CITY-ST-ZIP | | | |



DO NOT WRITE IN THIS SPACE

SIGNATURE: SOLOMON GOLDNER

2/17/98 305-810-2700

CR2E034 (10/97)