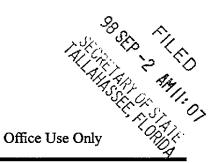
P96000092123

	JOHN A. MARGOLIS
19	ATTORNEY AT LAW
_	SUITE 330, 9990 S.W. 77th AVE.
	MIAMI, FLORIDA 33156

City/State/Zip

Phone #



CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

			•	800	<u> </u>	1086
1.				TO PERSONNEL	002631 -09/02/980 ******35.00	*****35.00
	(Согра	oration Name)	(Doc	ıment #)		
2.						
<u> </u>	(Corpo	oration Name)	(Doc	ıment #)		
3.						
	(Corpo	oration Name)	(Doc	ıment #)		
4.						
••	(Corpo	oration Name)	(Doc	ıment #)	· · · · · · · · · · · · · · · · · · ·	
Walk in		Pick up time		Certifie	d Copy	
		•			ate of Status	
☐ Mail out	<u></u>	Will wait	Photocopy	- Certific	ate of Status	
NEW FILINGS		AMEND	MENTS			
Profit		Amendmer	nt			
NonProfit		Resignation	n of R.A., Officer/Directo	or		
Limited Liability		Change of	Registered Agent			
Domestication		Dissolution	n/Withdrawal			
Other		Merger				

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

RAChg.

YS SEP 1 4 1998

Examiner's Initials	

- > STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508,	
-	oration organized under the laws of the State ofFlorida	
_	ving statement in order to change its registered office or registered	agent, or both, in the
State of Florida.	. NEW WORLD MEDICAL CENTER INC	
1. The name of the	ne corporation is: NEW WORLD MEDICAL CENTER, INC	- ,
2. The mailing ac	dress of the corporation is: 4100 W. Flagler Street,	#B2
	Miami, FL 33134	
3. Date of incorp	oration/qualification: 11/8/96 Document number:	P96000092123
4. The name and	address of the current registered agent and office:	
		3.0
	Beatriz Montalvo	老公司 7
_	7050 S.W. 156 Court	記るに
	Miami, Florida	SSE E
5. The name and	address of the new registered agent and office: (P. O. Box Not Acc	eptable)
	John A. Margolis, Esq.	97 9
_	Suite 330, 9990 S.W. 77th Aven	ue
_	Miami, FL 33156-2699	
The street addre	ss of its registered office and the street address of the business of d, will be identical.	fice of its registered
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors e board.	or by an officer so
1500	Tomotophico 8	126/98
(Signature o	f an officer, chairman or vice chairman of the board)	(Date)
	iz Montalvo, Secretary/Treasurer	
.	(Printed or typed name and title)	
corporation, I he I fürther agree t	med as registered agent and to accept service of process for the cereby accept the appointment as registered agent and agree to a comply with the provisions of all statutes relative to the proper my duties, and I am familiar with and accept the obligation of m	ct in this capacity. · and complete
(/pl	Margalis 8/21	198
(Si	gnature of Registered Agent) (Date)	
If signing on behalt	f of an entity:	
<u> </u>	-	
T)	yped or Printed Name) (Capacity)	

* * * FILING FEE: \$35.00 * * *