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Secretary of State

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PROFIT CORPORATION
ANNUAL REPORT
1999

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

DOCUMENT # P96000092611

1. Corporation Name
ABODECARE, INC.

Principal Place of Business
2724 OAK TREE LANE
OAKLAND PARK FL 33309

Mailing Address
2724 OAK TREE LANE
OAKLAND PARK FL 33309



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/07/1996

4. FEI Number
65-0840172

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 the current year intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 5910 NE 22ND TER
Suite, Apt. #, etc.

2a. Mailing Address
26 5910 NE 22ND TER
Suite, Apt. #, etc.

22 City & State
23 FT LAUDERDALE FL
Zip Country
24 33309 25 USA

27 City & State
28 FT LAUDERDALE FL
Zip Country
29 33308 30 USA

9. Name and Address of Current Registered Agent
STAAAB, JOHN P
2724 OAK TREE LANE
OAKLAND PARK FL 33309

10. Name and Address of New Registered Agent
81 Name RICHARD A FASANELLI JR.
82 Street Address (P.O. Box Number is Not Acceptable)
5910 NE 22ND TER
83
84 City FT LAUDERDALE FL 85 Zip Code 33308

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. any familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Richard A Fasanelli Jr. RICHARD A FASANELLI JR. 4/11/99
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
P	FASANELLI, RICHARD A JR	4410 N.W. 12TH TER	FT LAUDERDALE FL 33309	<input type="checkbox"/>
V	STAAB, JOHN P	2724 OAK TREE LANE	OAKLAND PARK FL 33309	<input checked="" type="checkbox"/>
S	STAAB, JUDI A	2724 OAK TREE LANE	OAKLAND PARK FL 33309	<input checked="" type="checkbox"/>
T	FASANELLI, RICHARD A	7350 S. TAMiami TRAIL SUITE 86	SARASOTA FL 34231	<input checked="" type="checkbox"/>
D	FASANELLI, KERRY	4410 NW 12 TERRACE	FT LAUDERDALE FL 33309	<input type="checkbox"/>
D	GRAY, LOUISE	7350 S. TAMiami TRAIL SUITE 86	SARASOTA FL 34231	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1	1.2	1.3	1.4	
2.1	2.2	2.3	2.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1	3.2	3.3	3.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1	4.2	4.3	4.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1	5.2	5.3	5.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1	6.2	6.3	6.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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, with all other like empowered.

SIGNATURE: Richard A Fasanelli Jr. RICHARD A FASANELLI JR. 4/11/99
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)