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## **PROFIT CORPORATION** ANNUAL REPORT 1998 DOCUMENT # DOCOGOGAGGE (4)

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 28 1998 8:00am Secretary of State

Prir. <b>75</b> 7	ncipal Place	E CARE, of Busines	INC.	Mailing 7575 Wi	Address EST FLAGLER ST	<u>-</u>					
#2	05 Ami fl 3314	14		#205 MIANI F	#205 Miami Fl 33144			DC	DO NOT WRITE IN THIS SPACE		
MI.	1ml FL 33[4			MINMI F	L 33177			3. Date Incorporated			
								11/13/1996			\ \
2.	Principal Pl	lace of Busin	ness	2a. Maili	ing Address			4. FEI Number		IA	pplied For
21				26				65-0705812			ot Applicable
	Suite, Apt. #, etc.			<b>├</b> ─¬	Suite, Apt. #, etc.			5. Certificate of Statu	s Desired ·		Additional equired
	City & State	θ	110		& State			6. Election Campaign	Financing	\$5.00	May Be
23				28				Trust Fund Contrib			to Fees
	Zip		Country	Zip		Cou	ntry	8. This corporation or	ves or has paid t	the current year In	tangible
24			25	29		30		Personal Property	Tax due June 30	. Yes	□ No
		9. Name	and Address of Cu	rrent Registered	Agent			10. Name and Addres	s of New Regis	tered Agent	
	BEL	. BEATRIZ	M				81 Name				
	757	5 WEST FI	AGLER STREET				62 Street A	Address (P.O. Box Number is	Not Acceptable)		
#205											
	MIA	MI FL 3314	14				83				
						i	84 City			les Zo	Code
							1			FL   "   '	
11.	Pursuant t	to the provis	ions of Sections 607. sent, or both, in the S	0502 and 607.15i	08, Florida Statu ich change was	tes, the at	oove-named o	corporation submits this state oration's board of directors. I	ment for the purp	oose of changing	its registered
	agent. I ar	m lamiliar w	nd accept the ol	bligations of Sect	tion 607.0505, F	orida Stat	utes.	. 00 . 00 - 10	- 4	and a k	2-1
StG	NATURE .		lus	1 / Qe	2 B	eat.	RIZIY	BEL-YRESIL	ENT I	DHROM	8
12.		Signature, typed		AND DIRECTORS	<u> </u>	13.	Agent signature i	required when reinstating) ADDITIONS/CHANG		DATE OF THE PROTO	DS IN 12
TITLE		D	OFFICENS	AND DIRECTOR	DELETE	1.1 10	n F	ADDITIONS/CHANC	ica 10 om lock	☐ Change	Addition
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	ET ADDRESS		ST FLAGLER STR	FFT			REET ADDRESS				
	-ST-ZIP	MIAMI FI									
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STRE			L 33144	<del></del>	☐ DELETE		LE			Change	Addition
	ET ADDRESS		L 33144		DELETE	2.1 TIT 2.2 NA	LE			Change	Addition
CITY			L 33144		☐ DELETE	2.1 TIT 2.2 NA 2.3 ST	ile Ime Reet address			Change	Addition
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Interest certain the information supplied with this filling cools not qualify for the exemptor stated in Section 1.19.07(3)(f), Florida Statutes. Further certain that the information indicated on this annual report or supplemental annual report is frue 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.

SIGNATURE: