

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 FEB 24 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **99000000443**

1. Corporation Name

MED-CARE SUPPLY CORP.

WD3-3138

600011397696
01/30/03--01049--004 **758.75

REINSTATEMENT 01-03

02/08/01 90460 050 150.00

4. Date Incorporated or Qualified
To Do Business in Florida

12/20/96

5. FEI Number

65-0717023

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

VICTORIA TARPEY

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

3320 N. EAST 34th ST.

Suite, Apt. #, Etc.

City

FT. LAUDERDALE

State

FL

Zip Code

33308

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Victoria Tarpey

REGISTERED AGENT MUST SIGN

Date

1-28-03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES.	VICTORIA TARPEY	20 HARDCRABBLE ROAD	SHERMAN, CT 06784

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Victoria Tarpey

**VICTORIA
TARPEY**

Date

1-28-03

Daytime Phone #