	PROFIT RPORATION JAL REPORT 1999		FLORIDA DEPAR FLORIDA DEPAR Katherin Secretary DIVISION OF C	e Harris	STATE	Mar 23 Secre	tary	99 8:(ate
. corporation	MENT # P97 ^{n Name} EDICAL SERVICES, IN		:496		·				
rincipal Place 75 SW 27TH AMI FL 33145		1005	Mailing Address 1005 SW 87TH AVE MIAMI FL 33174-3208						
						DO NO 3. Date Incorporated or Qu 02/07/1997		THIS SPACE	
Principal P	Place of Business		Mailing Address			4. FEI Number			Applied For Not Applicable
Suite, Apt. #, etc.			26 Suite, Apt. #, etc.			5. Certifcate of Status Des	\$8.75 Additional Fee Required		
	City & State		City & State			6. Election Campaign Fina Trust Fund Contribution		Adde	0 May Be ad to Fees
Zip	Country	29	Zip . [Countr 30	y	 This corporation owes the Personal Property Tax. 	he current ye	ar Intangible	XXN0
	9. Name and Address of		ared Agent			10. Name and Address of	New Regist	ered Agent	
FLEITES, JUAN A				81					
2075	5 SW 27TH AVE.		82 Str		2 Street Add	ress (P.O. Box Number is Not /	Acceptable)		
MIAN	MI FL 33145			83	3				
. Pursuant	to the provinient of Continue	he State of Florida	a. Such change was au	s, the above thorized by	City	poration submits this statement ion's board of directors. I hereby	for the nurno	FL	ip Code its registered registered
Pursuant office or r agent. I a GNATURE	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of ref	he State of Florida he obligations of, 5	a. Such change was au Section 607.0505, Flor applicable. (NOTE: CTORS	s, the above thorized by da Statutes	City re-named corp the corporati s.	poration submits this statement ion's board of directors. I hereb ed when remstating) ADDITIONS/CHANGES	for the purpo y accept the a	FL se of changing appointment as	its registered registered TORS IN 12
. Pursuant office or r agent. I a GNATURE 	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE:	84 s, the above thorized by da Statutes Registered Age 13.	City re-named corp the corporati s.	ed when reinstating)	for the purpo y accept the a	FL se of changing appointment as	its registered registered TORS IN 12
Pursuant office or r agent. I a GNATURE 	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flor applicable. (NOTE: CTORS	Registered Age 13. 1.1 TITLE 1.2 NAME	City re-named corp the corporati s.	ed when reinstating)	for the purpo y accept the a	FL se of changing appointment as	its registered registered TORS IN 12
Pursuant office or r agent. I a GNATURE 	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	84 s, the above thorized by da Statute: 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1	City re-named corp the corporati s.	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 pe Addition
Pursuant office or r agent. I a GNATURE E E EET ADDRESS Y-ST-ZIP E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flor applicable. (NOTE: CTORS	84 s, the above thorized by da Statute: 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE	City re-named corp the corporati s.	ed when reinstating)	for the purpo y accept the a	FL se of changing appointment as	its registered registered TORS IN 12 pe Addition
Pursuant office or r agent. I a GNATURE E E E E E E E E E E E E E E E E E	to the provisions of Sections registered agent, or both, in t m familiar with, and accept th Signature, typed or printed name of reg OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.4 CITY-1 2.1 TITLE 2.2 NAME	City re-named corp the corporati s.	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 pe Addition
Pursuant office or r agent. I a GNATURE E E E E E E E E E E E ADDRESS E E E TADDRESS	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1	City re-named corp the corporate S. TADDRESS ST-ZIP ET ADDRESS	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition
Pursuant office or r agent. I a BNATURE E E EET ADDRESS (-ST-ZIP E E E E TADDRESS (-ST-ZIP E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of reg OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE.	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.3 STREE 2.3 STREE 2.4 CITY- 3.1 TITLE	City re-named corp the corporations s. TADDRESS ST-2IP TADDRESS ST-2IP TADDRESS ST-2IP	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition
Pursuant office or r agent. J a SNATURE E EEET ADDRESS (-ST-ZIP E E EEET ADDRESS (-ST-ZIP E E	to the provisions of Sections registered agent, or both, in the signature, typed or printed name or reconstruction OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	City re-named corp the corporations s. TADDRESS ST-2IP TADDRESS ST-2IP TADDRESS ST-2IP	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition
Pursuant office or r agent. I a GNATURE E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP	to the provisions of Sections registered agent, or both, in the signature, typed or printed name or reconstruction OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori Applicable. (NOTE: TTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-1	City City City the corporati s. T ADDRESS ST-ZIP CT ADDRESS ST-ZI	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition ge Addition
Pursuant office or r agent. I a GNATURE E RETADDRESS Y-ST-ZIP E REETADDRESS Y-ST-ZIP E REETADDRESS Y-ST-ZIP E E REETADDRESS Y-ST-ZIP E	to the provisions of Sections registered agent, or both, in the signature, typed or printed name or reconstruction OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	a. Such change was au Section 607.0505, Flori applicable. (NOTE: TORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY -: 2.1 TITLE 2.3 STREE 2.4 CITY- 3.1 TITLE 3.3 STREE 3.3 STREE	City City City the corporati s. T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition ge Addition
Pursuant office or r agent. 1 a GNATURE E KET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KE	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori Applicable. (NOTE: TTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	City City City the corporati s. T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition ge Addition
Pursuant office or r agent. 1 a GNATURE E KET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori applicable. (NOTE: TTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 3.1 TITLE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	City City City City City City Citororotati S. Citororotati Citorotati Citorot	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition ge Addition
Pursuant office or r agent. 1 a GNATURE E KETADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E KEET ADDRESS Y-ST-ZIP E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori Applicable. (NOTE: TTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 3.3 STREE 3.4 CITY- 3.1 TITLE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE	City City City City City City Citororotati S. Citororotati Citorotati Citorot	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition ge Addition
Pursuant office or r agent. 1 a 3NATURE E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori applicable. (NOTE: TTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 3.1 TITLE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	City City City City City City Citororotati S. Citororotati Citorotati Citorot	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 ge Addition ge Addition
Pursuant office or r agent. 1 a 3NATURE E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori applicable. (NOTE: TTORS DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 3.1 TITLE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.3 STREE 5.4 CITY-	City City City City City City Citororotati S. Citororotati Citorotati Citorota	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 je Addition ge Addition ge Addition ge Addition
Pursuant office or r agent. I a GNATURE E KET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name or re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori applicable. (NOTE: TTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE	City City City City City City Citoroport S. City Citoroport S. Citoroport Ci	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 je Addition ge Addition ge Addition ge Addition
Pursuant office or r agent. I a GNATURE	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of rec OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S distered agent and title if a	A. Such change was au Section 607.0505, Flori applicable. (NOTE: TTORS DELETE DELETE	Registered Age 13. 1.1 TTLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TTLE 3.3 STREE 3.4 CITY- 4.1 TTLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TTLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.1 TTLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.1 TTLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.1 TTLE 5.3 STREE 5.4 CITY- 5.1 TTLE 5.4 CITY- 5.1 TTLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.1 TTLE 5.3 STREE 5.4 CITY- 5.1 TTLE 5.3 STREE 5.4 CITY- 5.1 TTLE 5.3 STREE 5.4 CITY- 5.1 TTLE 5.3 STREE 5.4 CITY- 5.1 TTLE 5.4 CITY- 5.1 STREE 5.4 CITY- 5.4 CITY-	City City City City City City Citoroport S. City Citoroport S. Citoroport Ci	ed when reinstating)	for the purpo y accept the a	FL	its registered registered TORS IN 12 je Addition ge Addition ge Addition ge Addition
Pursuant office or r agent. 1 a GNATURE E E E E E E E E E E E E E E E E E E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of re- OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, S pistered agent and title if i CERS AND DIREC	A. Such change was au Section 607.0505, Flor applicable. (NOTE: TTORS DELETE DELETE DELETE	Registered Age 13. 1.1 TTLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 3.3 STREE 3.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 5.4 CITY- 6.1 CI	City City City City City City Citoroport S. City Citoroport S. Citoroport Ci	ad when remsiating) ADDITIONS/CHANGES	for the purpor y accept the a	FL	its registered registered TORS IN 12 je Addition ge Addition ge Addition ge Addition
Pursuant office or r agent. 1 a 3NATURE E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E	to the provisions of Sections registered agent, or both, in t am familiar with, and accept th Signature, typed or printed name of re OFFIC DP FLEITES, JUAN A 2075 SW 27TH AVE. MIAMI FL 33145 DST FLEITES, MARIA A 2075 SW 27TH AVE. MIAMI FL 33145	he State of Florida he obligations of, 5 pistered agent and title if a CERS AND DIREC	A. Such change was au Section 607.0505, Flor Applicable. (NOTE: TORS DELETE DELETE DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 5.1 TITLE 5.3 STREE 5.4 CITY 5.1 TITLE 5.3 STREE 5.4 CITY 5.1 TITLE 5.3 STREE 5.4 CITY 5.1 TITLE 5.4 CITY 5.1 TITLE 5.3 STREE 5.4 CITY 5.1 TITLE 5.4 CITY 5.1 CI	City City City City City Te-named corporation S. Table Table Table Table S. Table Table Table S. Table Table Table S. Table Table S. Table Table Table S. Table Table Table S. Table	ed when reinstating)	for the purpory accept the a <u>DA</u> <u>TO OFFICER</u>	FL se of changing appointment as TE RS AND DIREC Changing Changing	its registered registered TORS IN 12 pe Addition ge Addition ge Addition ge Addition ge Addition ge Addition ge Addition