CR2E034 (9/99)

<b>2000</b> DOCUM		# P970000	030493	بورسه از				FILE	ΞD		
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JAMES G. SCHWADE, M.D., AND ASSOCIATES, INC.									•	• •	
Principal Place	e of Busines	<u> </u>	Mailing Address			4	TAILL	reinry Ahasse	er e E. Fle	DRIDA	
/O 100 SE 2ND ST B FLOOR IAMI FL 33131 S :. Principal Place of Business		C/O 100 SE 2ND ST 28 FLOOR MIAMI FL 33144-2438 US									
		ness	3. Mailing Address								
			Suite, Apt. #, etc.		1	DO N	OT WRITE IN	N THIS SP	ACE		
City & State	<del>_</del>		City & State	<u> </u>		4. FE	Number 65-0	787007	<u>.</u>		plied For
Zip		Country	<sup>2</sup> 9313 ]	Country		<b>5.</b> Ce	rtificate of Status D			B.75 Add	
	6. Name	and Address of Current	Registered Agent			7. Na	me and Address o	f New Regis			
KTG&S REGISTERED AGENT CORPORATION					lame	(20.5)	N				
100 \$	s.e. 2nd s		ranoi.	SI	treet Address	(P.U. Box	Number is Not Acc				
	i Floor Al el 3313	1					<del></del>				
MIAMI FL 33131					Ca					1 Zin Code	
3. The above	named entit		or the purpose of changing i					ate of Florida	FL.	Zip Code	
3. The above  SIGNATURE _  9. This corpo  Tax filing re	named entit	ty submits this statement fo	and title if applicable. (NC	ts registered of	office or registered and signature require \$150.00 lbe \$550.00	ed when reins	10. Election Camp Trust Fund Co	paign Financ ntribution.	DATE	<b>\$5.0</b> Added	<b>0</b> May Be
3. The above  SIGNATURE _  9. This corpo  Tax filing re (See criteri	named entit Signature, typed pration is elig equirement ia on back)	ty submits this statement for d or printed name of registered agent gible to satisfy its Intangible and elects to do so.	and title if applicable. (NC FILE NOV After MAY 1, 2 Make Check Paya	ts registered of DTE: Registered Age W!!! FEE IS: 2000 Fee will able to Depar	office or registered and signature require \$150.00 lbe \$550.00	ed when reins	stating)  10. Election Camp	paign Financ ntribution.	DATE	\$5.0 Added	O May Be to Fees
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changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date