State of the state

State of Florida
Office of State Treasurer
Tallahassee, Florida

FOR OFFICIAL USE

NUMBER

05/25/2000

03763

DEBIT MEMORANDUM

970000 56400

To: DEPT. OF STATE

| | | ئس |
|-----------------------|------------|----------|
| General Revenue Total | 0.00 | |
| Trust Total | 5,054.00 | |
| Other Total | 0.00 | 80000383 |
| Total | \$5,054.00 | |

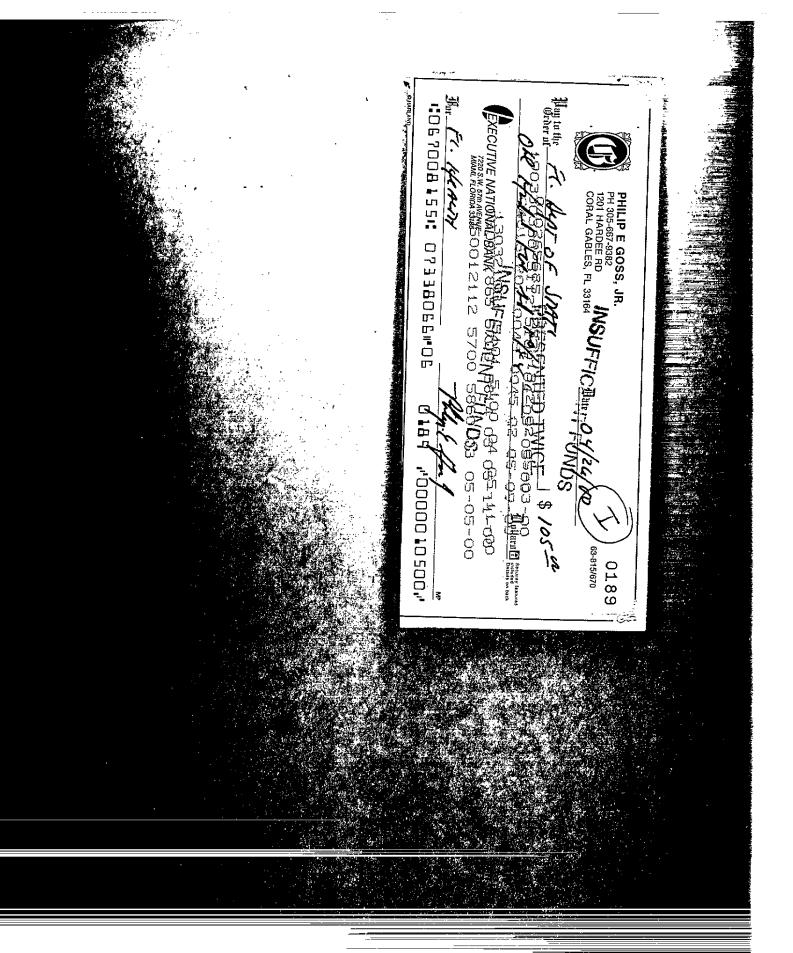
Distribution

| Cross Ref | Samas Code | Reason | Amount |
|--------------|--------------------------------------|--------------------|----------|
| | | OTHER | 24.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 35.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | ACCOUNT CLOSED | 43.75 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 61.25 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 61.25 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | ACCOUNT CLOSED | 70.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | ACCOUNT CLOSED | 70.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | ACCOUNT CLOSED | 75.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 105.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | ACCOUNT CLOSED | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | OTHER | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | OTHER | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | OTHER | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | OTHER | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | OTHER | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 150.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 158.75 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 900.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FUNDS | 1,350.00 |
| 012 | 45-20-2-130001-45300000-00-000100-00 | INSUFFICIENT FORDS | |

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Process Date: 05/11/2000

State Treasurer



DEPT OF STOTE 4500453 FOR DEPOSIT ONLY -05/01/00--U1114--003 1009068796 ****105.00



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 13, 2000

Philip E. Goss Jr. 1201 Hardee Rd. Coral Gables, FL 33164

SUBJECT: FLORIDA HEALTH INSTITUTE, INC.

Ref. Number: P97000056400

Debit Memo #: 03763-1

This is to inform you that your check #0189 dated April 26, 2000 in the amount of \$105.00 and submitted for FLORIDA HEALTH INSTITUTE, INC. has been returned to us by your bank because of Insufficient Funds.

We request that you remit a cashier's check or money order in amount of \$120.00 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 700A00033654

cc:Florida Health Institute,Inc. 9370 Sunset Dr., A103-104A Miami, Fl. 33173



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 21, 2000

Philip E. Goss, Jr. 1201 Hardee Rd. Coral Gables, FL 33164

SUBJECT: FLORIDA HEALTH INSTITUTE, INC.

Ref. Number: P97000056400

Debit Memo #: 03763-I

Due to your failure to respond to our previous letter advising you of the returned check #0189, the Officer/Director Resignation for FLORIDA HEALTH INSTITUTE, INC. has been cancelled and is considered not filed as of July 21, 2000.

Please be advised the individual resigning in the document that was cancelled is now reflected as a current officer and/or director.

Letter number: 100A00040009

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely Melinda Lilliston Administrative Assistant II Division of Corporations