**PROFIT** CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000073014

CONTINUCARE MANAGED CARE INC

FILED 99 OCT 14 AM 8: 23 SECRETARY OF STATE TALLAHASSEE. FLORIDA

Principal Place of Business  100 S.E. 2ND STREET 36TH FLOOB MIAMI Et 33131  US  2. Principal Place of Business 21 80 SW 8 th St. 26 Suite, Apt #, etc. 21 Suite, Apt #, etc. 22 Suite, Apt #, etc. 23 Mailing Address 24 Mailing Address 25 Centificate of Status Desired 26 State 27 S C M 4  City & State 28 S C M 4  Country  29 Country  20 Country  20 Country  20 Country  21 Country  22 Suite, Apt #, etc. 23 S C M 4  Country  24 Country  25 Country  26 S C M 4  Country  27 Country  28 S C M 4  Country  28 S C M 4  Country  29 Country  20 S. This corporation owes the current year
100 S.E. 2ND STREET 36TH FLOOB MIAMI ET 33131  US  2. Principal Place of Business 21 80 5 W 8 th St. 26 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 May Be Added to Fees 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 21 Suite, Apt. #, etc. 22 Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 24 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 20 Suite, Ap
3. Date Incorporated or Qualified 08/22/1997  2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0796178 Not Applied For Not Applied For Not Applied For Not Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State  2a. Mailing Address Fee Required Fee Required Fee Required Fee Required Fee Required Trust Fund Contribution Fee Reduction Fee Required Trust Fund Contribution Fee Reduction Fee Required Fee Req
21   80 SW 8th St.   26   Same   65-0796178   Not Applicate Suite, Apt. #, etc.   Suit
22   Suire 2350   27   Same   Scentificate of status Desired   Fee Required
City & State  6. Election Campaign Financing Trust Fund Contribution  Added to Fees  Zip  Country  Zip  Country  S. This corporation owes the current year
[24] 33/30 25 Dade 29 Same 30 Same Intengible Personal Property. Yes No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent
UCC FILING SEARCH & SERVICES INC.
526 EAST PARK AVENUE  Street Address (P.O. Box Number is Not Acceptable)
TALLAHASSEE FL 32301
84 City FL 85 Zip Code
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.
SIGNATURE Ed Nand President 10/13/99
Signature, typed or printed name of registered agent and titlef applicable (NOTE: Registered Agent algorature required when reinstating)  DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P DELETE 1.1 TITLE P Change Addition Addition SALAZAR, GUILLERMO 12 NAME SALAZAR, GUILLERMO
1
A C C
THE EVP Change Change Change Change
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STREET ADDRESS 100 S.E. 2ND STREET, 36TH STREET 23 STREET ADDRESS SO SW 84 ST. , SPE. X 55-
CHYSTEP MIAMIFL 33131 24CITYSTEP MIRHI, FL 33/30
TITLE DELETE 31TITLE Change Addit
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CHYSTZIP

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE: SIGNATURE OF PRINTED NAME OF SIGN OFFICER OR DIRECTOR

DELETE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 or an attachment with an address.

Daytime Phone #

Change Addition