2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 17, 2008 8:00 am Secretary of State

DOCUMENT # P97000080453 1. Entity Name CONTINUCARE MSO, INC.						06-17-2008 9	90001 00	13 ***550	0.00			
Principal Place 7200 CORPO SUITE 600 MIAMI, FL 3	DRATE CENTER DR	Mailing Address 7200 CORPORATE CENTER DR SUITE 600 MIAMI, FL 33126			1 / P 1 / F 1 / 1	(8)						
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address	Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			06062008	Chg-P	CR2E03	34 (12/06)				
City & State		City & State	City & State		4. FEI Number 65-0780				plied For t Applicable			
Zip	Country	Zip	Country		5. Certificate of	of Status Desired		8.75 Add ee Required				
	6. Name and Address of Current F	legistered Agent			7. Name and	Address of New R	egistered A	gent				
CORROR	ATE ODEATIONS NETWORK II	NO	Name	ame								
CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410				Street Address (P.O. Box Number is Not Acceptable)								
	, , , , , , , , , , , , , , , , , , ,											
			City				FL	Zip Code	е			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE												
	LE NOW!!! FEE IS \$550.00 ue by September 12, 2008	n Financing bution.		00 May Be d to Fees				The second secon				
10.	OFFICERS AND [DIRECTORS	11,	_		CHANGES TO OFFI	ICERS AND	DIRECTORS	3 IN 11			
NAME STREET ADDRESS CITY-ST-ZIP	PD PFENNIGER, RICHARD C 7200 CORPORATE CTR DR MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Œ	•			Change Change	Addition .			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERNANDEZ, FERNANDO 7200 CORPORATE CENTER DR MIAMI, FL 33126	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO	•			Change	Addition			
NAME SIREET ADDRESS CITY-ST-ZIP	V IZQUIERDO, LUIS 7200 CORPORATE CTR DR. MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOPEZ, HOLLY 7200 CORPORATE CENTER DR MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition			
TITLE NAME STREET ADDRESS CHY-ST-ZIP	V ROSELLO, GEMMA 7200 CORPORATE CENTER DR MIAMI, FL 33126	☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP	77.11				☐ Change	Addition			
NAME STREET ADDRESS CITY-ST-ZIP	D WILKER, MELISSA 7200 CORPORATE CTR DR. MIAMI, FL 33126	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			cckhan	n	Change	Addition			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Mel	lissa	Beck	am
	SIGNATURE	AND TYPED OR PRIN	TED NAME OF SIGNING	OFFICER OR DIRECTOR



*3*05-500-2007