

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR REINSTATEMENT  
**98-99AR**  
 FLORIDA DEPARTMENT OF STATE  
 Katharine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

93 JUN -7 AM 11:46  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # **P970000091126**  
 1. Corporation Name  
**A-R Home Health Care, Inc**  
**9745 SW 72 Street Suite # 112E**  
**Miami FL 33173**

700002907177--9  
 -06/17/99--01017--003  
 \*\*\*\*300.00 \*\*\*\*300.00

Principal Place of Business Mailing Address  
**9745 SW 72 Street Suite # 112E**  
**Miami FL 33173**  
 If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
**9745 SW 72 Street**  
 Suite, Apt. #, etc. **112E**  
 City & State **Miami FL**  
 Zip **33173** Country **USA.**

3. New Mailing Office Address, If Applicable  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

4. Date Incorporated or Qualified To Do Business in Florida  
**October 22, 1997.**

5. FEI Number **65-0810783** Applied For  
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
	<b>Ricardo Mulet</b>	<b>11015 SW 152 ST</b> <b>Miami FL 33157</b>	<b>Miami FL 33157.</b>

8. Name and Address of Current Registered Agent  
**Roxanne Angelica**  
**9350 SW 64th st**  
**Miami, FL 33173**

9. Name and Address of New Registered Agent  
 Name **Roxanne Angelica**  
 Street Address (P.O. Box Number is Not Acceptable) **9350 SW 64th st**  
 Suite, Apt. #, Etc. **Miami**  
 City **Miami** State **FL** Zip Code **33173**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  
 Signature of Registered Agent **Roxanne Angelica** Date **3/27/99**  
 REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30 Yes  No  (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: **Ricardo Mulet**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date **305-992-7885**  
 Daytime Phone # **305 279-1981**

CR2E081 (12/96)

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**A & R Home Health Care, Inc.**

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9745 SW 72<sup>nd</sup> Street Suite #112-E  
Miami, Fl 33173  
Phone: (305) 279-1981  
Fax: (305) 279-1418

February 23, 1999

DIVISION OF CORPORATION  
PO Box 6327  
Tallahassee, Fl 32314

Re: Reinstatement

Dear Y. Fisher:

This letter is a formal request to please waive the late fees and reinstate A & R Home Health Care, Inc., due to the fact that the annual report was never received at the address originally provided to the Department of Corporation. We have since moved to the address mentioned above. We have had problems with the Post Office in forwarding our mail. We move to this new location at the end of February (attached is the Occupational License with the date provided).

Enclosed you will also find the application for reinstatement since the original was sent to the incorrect address and the yearly fee of \$150.00.

If you have any questions, please contact our office at the above-mentioned address.

Sincerely,

Ricardo Muler, President

