


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P97000092987		
1. Entity Name CONTINUACARE MEDICAL MANAGEMENT, INC.		

FILED
05 OCT 12 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09262005 REIN-P CR2E098 (6/04)

Principal Place of Business 80 SW 8TH ST. SUITE 2350 MIAMI, FL 33130	Mailing Address 80 SW 8TH ST. SUITE 2350 MIAMI, FL 33130
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2. Principal Place of Business 7200 Corporate Center Dr. Suite #, etc. Suite 600 City & State Miami, FL Zip 33126 Country U.S.	3. Mailing Address 7200 Corporate Center Dr. Suite #, etc. Suite 600 City & State Miami, FL Zip 33126 Country U.S.
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4. FEI Number 65-0791417	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PFENNIGER, RICHARD C 80 SW 8TH ST., SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	See Attached <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HEALY, PATRICK M 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300060728933 10/18/05--01096--001 **2063.75 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IZQUIRDO, LUIS H 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS HOLT, JANET L 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR 10/17 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SMITH, KAREN A 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FROST, PHILLIP M.D. 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Fernando Fernandez 10/6/05 305.500.2000 Date Daytime Phone #
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Title T ☐ Change ☒ Addition
Name FERNANDEZ, FERNANDO
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126

Title V ☐ Change ☒ Addition
Name ROSELLO, GEMMA
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126

Title V ☐ Change ☒ Addition
Name LOPEZ, HOLLY
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126

Title D ☐ Change ☒ Addition
Name STRAIT, MARVIN
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126

Title D ☐ Change ☒ Addition
Name CRESCI, ROBERT
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126

Title D ☐ Change ☒ Addition
Name FLANZRAICH, NEIL
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126

Title D ☐ Change ☒ Addition
Name NUDEL, JACK
Street Address 7200 CORPORATE CENTER DRIVE
City-St-Zip MIAMI, FLORIDA 33126