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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

**DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000007851

CIRCLE OF HEALTH, INC.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90108 009 \*\*\*150.00



COMPANO BEACH FL 30073   POMPANO BEACH FL 30073   DO NOT WRITE IN THIS SPACE	Principal Place	e of Business		Mailing Address						
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22. Mailing Address   22. Mailing Address   25. Corlicate of Status Desired   58.75 Additions   58.75							01/26/1998			ĺ
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Zip	¬ 🛫			28 7 6 50 6 14 CM Rol 61-			,			
25 Name and Address of Current Registered Agent  9. Name and Address of Fourrent Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Speech Address (P.O. Box Number is Not Acceptable)  13. Speech Address (P.O. Box Number is Not Acceptable)  14. Pursuant to the provisions of Sections 807 0502 and 607 1508. Florids Statutes, the above-named corporation statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 807 0502 Florids Statutes, the above-named corporation's board officiency. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 807 0502 Florids Statutes.  12. Spoulars, typed or period mains of registered agent and the deplicables.  12. OFFICERS AND DIRECTORS 12. TITLE	<del></del>		y			intry	8. This corporation owes the	ne current year Intar	ngible .	
9. Name and Address of Current Registered Agent  GOULDING, DONALD 7400 NW 45TH AVE POMPANO BEACH FL 33073  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 is registered agent. I amendment of the purpose of changing is registered.  12. NOTE: Registered Agent. I amendment of the purpose of the appointment agent and the agent agent and the purpose of the appointment agent	24 334V	<b>1</b>	A > 1	29 3 2443	30	AZN	-· '		☐ Yes	No
GOULDING, DONALD 7400 NW 44TH AVE POMPANO BEACH FL 33073  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Street Address (P.O. Box Number is Not Acceptable)  87 Street Address (P.O. Box Number is Not Acceptable)  88 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Street Address (P.O. Box Number is Not Acceptable)  87 Street Address (P.O. Box Number is Not Acceptable)  88 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Street Address (P.O. Box Number is Not Acceptable)  87 Street Address (P.O. Box Number is Not Acceptable)  88 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)	- 1			Registered Agent			10. Name and Address of	New Registered A	gent	
PADD NW 44TH AVE POMPANO BEACH FL 33073    Street Address (P.O. Box Number is Not Acceptable)						1 1 3	, ~ ~			
Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. STREET ADDRESS  CITY ST. 2P  TIME  DELETE  21 TITLE  22 NAME 22 NAME 22 NAME 23 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  31 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  31 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  32 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  31 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  31 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  32 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  31 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  32 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  33 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  34 STREET ADDRESS  CITY ST. 2P  TIME  DELETE  35 STREET ADDRESS  STREET AD	GOU	lding, donald				Street	Addrson (B.O. Bay Number in Not A	- CAND		
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 original or registered signent, or both, in the State of Florida. Such change was authorized corporation's board of directors. I hereby accept the appointment as registered original provided in the corporation of the corporation of the purpose of changing its registered original provided in the corporation of the purpose of changing its registered original provided in the corporation of the purpose of changing its registered original provided in the provid	7400	NW 44TH AVE				102 Sileer	Address (F.O. Box Number is Not A	Coopiable)		1
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 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 607.0508. Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. If THE I NAME I STREET ADDRESS IN IT.	POMI	PANO BEACH FL 33	1073			83	3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~		
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 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 607.0508. Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12. If THE I NAME I STREET ADDRESS IN IT.	-	·				<u> </u>			1-11	
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 607.0598, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. NAME  15. NA							asien Osnati	. Fi		
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 697 (568). Florida Statutor.  SIGNATURE    To Fricers and Directors	44 Dureuant t	to the provisions of Sec	tions 607 0502 s	and 607 1508 Florida	Statutes the a	hove named	cornoration submits this statement	for the purpose of c	hanging its	egistered
SIGNATURE Signature, typed or protect name of registated signet and line if applicable  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  1.7 TITLE	office or re	egistered agent, or both	in the State of	Florida. Such change v	was authorize	d by the corpo	pration's board of directors. I hereby	accept the appoint	ment as reg	istered [
Signature, typed or printed many of registered agent and the if application and the image of th	agent. I <u>a</u> r				Flonda Star	utes.	<b>C</b> 3	1. 1.		
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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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE: