2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000014876

Entity Name: HEALTH SYSTEMS AMERICA MANAGEMENT CO.

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
555 S.W 14 SUNRISE,	18 AVENUE,S ⁻ FL 33325	ΓE 121			
Current Mailing Address:			New Mailing Address:		
555 S.W 148 AVENUE,STE 121 SUNRISE, FL 33325			P.O. BOX 430740 MIAMI, FL 33243-074 US		
FEI Number:	65-0813817	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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.				
SIGNATURE: Electronic Signature of Registered Agent				Dete	
Election Cam	tion is eligible to paign Financing	satisfy its Intangible Tax filing red Trust Fund Contribution ().	quirement and elects to do so (X).	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () PIERCEY, MICH 555 S.W 148 AV SUNRISE, FL 3	/ENUE #121	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSTD () LLANO, MANUE 555 S.W 148 AV SUNRISE, FL 3	/ENUE #121	Title: (Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL R. LLANO VSTD 05/01/2002