2003, FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

DOCUMENT

1. Entity Name

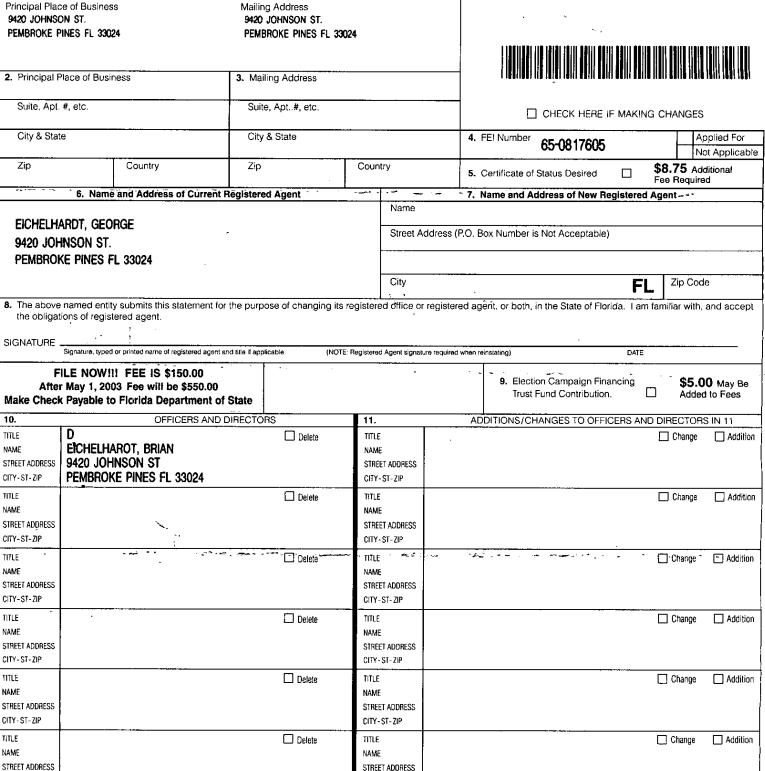
ACTION DISABILITY CLINICS, INC.



Apr 09, 2003 8:00 am Secretary of State 04-09-2003 90140 024 ***150.00

FILED

P98000020297



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 day quired 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,

CITY-ST-7IP

CITY-ST-ZIP