2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91344 028 ***150.00

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DOCUMENT # P98000020929

1. Entity Name
NATIONWIDE MEDICAL MANAGEMENT SERVICES, INC.

Principal Place of Business	Mailing Address
2175 NORTHEAST 120TH STREET NORTH MIAMI FL 33181	2175 NORTHEAST 120TH STREET NORTH MIAMI FL 33181

2. Principal Place of Business	3. Mailing Address
19620 PINES BLVD	19620 PINES BLVD
Suite, Apt. #, etc.: SUITE 114	Suite, Apt. #, etc.: SUITE 114
City & State: PEMBROKE PINES FL	City & State: PEMBROKE PINES FL
Zip: 33029 Country: ~~[struck out]~~	Zip: 33029 Country: ~~[struck out]~~

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0817254 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANEVE, RON
2175 NE 120 STREET
NORTH MIAMI FL 33181

7. Name and Address of New Registered Agent

Name: RON LANEVE
Street Address (P.O. Box Number is Not Acceptable): 19620 PINES BLVD
SUITE 114
City: PEMBROKE PINES FL Zip Code 33029

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 [signature] 4/23/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LANEVE, RON 2175 NORTHEAST 120TH STREET NORTH MIAMI FL 33181	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD. RON LANEVE 19620 PINES BLVD STE 114 PEMBROKE PINES FL 33029	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LANEVE, MICHELLE 2175 NORTHEAST 120TH STREET NORTH MIAMI FL 33181	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MICHELLE LANEVE 19620 PINES BLVD STE 114 PEMBROKE PINES FL 33029	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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 REQUIRED [signature] 4/23/2003 954 499 3671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #