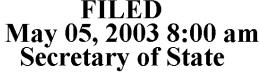
2003 FOR PROFIT CORPORATION

Mailing Address

UNIFORM BUSINESS REPORT (UBR) P98000052166 **DOCUMENT #** 1. Entity Name DADE MEDICAL HOLDINGS, INC.

SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Principal Place of Business



Daytime Phone #

riled
May 05, 2003 8:00 am
May 05, 2003 8:00 am Secretary of State
05-05-2003 90219 023 ***150.00

10008 W. FLA MIAMI FL 3317		. #175		10008 W. FLAGLER STREET. #175 MIAMI FL 33174-1828							
2. Principal P	Place of Busin	ness	3. Mailing A	ddress		_		1165 1611 6 50	10 11091 11910 T	1511 0 4 531 5 50 5	
Suite, Apt.	#, etc.		Suite, Apt	Suite, Apt, #, etc.			CHECK HERE IF MAKING CHANGES				
City & State				City & State						pplied For	
Zip		Country	Zip	C	Country	5. (Certificate of Status Desired		8.75 Add		
	6. Name	and Address of Curre	ent Registered Age	ent		7. N	Name and Address of New Re	gistered A	gent		
MCLFAN, RANDY 10008 W. FLAGLER STREET, #175 MIAMI FL 33174					Name Street Addres	Name Street Address (P.O. Box Number is Not Acceptable)					
IMIAIVII FL	33174				City			FL	Zip Cod	e	
the obligat	Signature, typed	or printed name of registered at	gent and title if applicable.		stered office or regis		ent, or both, in the State of Flor instating) 9. Election Campaign Fine	DATE		May Be	
Make Checi	•	D3 Fee will be \$550.	t of State				Trust Fund Contribution		Added	I to Fees	
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indicated of the cor	on this repor poration or th	t or supplemental repo	rt is true and accur mpowered to execu	ate and that my si ite this report as re	gnature shall have ti	he same l	119.07(3)(i), Florida Statutes. I egal effect as if made under or da Statutes; and that my name	ath; that I an	n an officer	or director	