

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2002 8:00 am
Secretary of State

07-28-2002 90200 030 ***150.00

DOCUMENT #
1. Entity Name *Empsco/Orco Care of South FL, Inc*

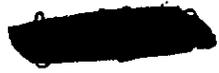
Ref# P98000059449

DO NOT WRITE IN THIS SPACE

41072

2. Principal Place of Business
950 Ocean Field Ave
Suite, Apt. #, etc.

3. Mailing Address
1199 Hillsboro Mile
Suite, Apt. #, etc.
135



DO NOT WRITE IN THIS SPACE

City & State
Deer Field Bch, FL

City & State
Hillsboro Bch, FL

4. FEI Number
650852607

Applied For
Not Applicable

Zip
33441

Country
Bahamas

Zip
33062

Country
Bahamas

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

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7. Name and Address of Current Registered Agent

Name
FRANK TOSCANO
Street Address (P.O. Box Number is Not Acceptable)
1199 Hillsboro Mile
City
Hillsboro Bch FL Zip Code
33062

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.

SIGNATURE *Frank Toscano*

7-22-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Pres Frank Toscano apt 135
1199 Hillsboro Mile
Hillsboro Bch FL 33062*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Frank Toscano*

7-22-02 954-428-8254

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

41072

P98000059449

Decocrete of South Florida
1199 Hillsboro Mile Apt 135
Hillsboro Beach, FL 33062

June 25, 2002

Florida Department of State
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

This letter is in response to the 2002 Uniform Business Report that is due on May 1, 2002. It has been brought to our attention that the said report was due on or before May 1 2002, but we did not receive a copy. Please be check your records to be sure that the address you have is correct. The above address above is the correct address.

We are very sorry but have had some administrative changes to our business and did not receive the 2002 Uniform Business Report, but can you please send us a copy of a blank UBR.

Enclosed is a check for \$150.00, which is the correct amount, instructed by the rep that we spoke too.

Thank you,

Frank Toscano
Decocrete of South Florida

Frank Toscano