

FILED
Jul 04, 2002 8:00 am
Secretary of State

APR-15-02 MON 11:43 AM LAZARUS CORPORATION FAX: 3052201440

05-01-2002 91611 020 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000047358
1. Entity Name
MARIA DEL CARMEN VALDES MD PA

DO NOT WRITE IN THIS SPACE



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2. Principal Place of Business 957 N.W. 132nd CT Subs. Apt. #, etc.		3. Mailing Address 957 N.W. 132nd CT Subs. Apt. #, etc.		4. FEI Number 57-1080737		Applied For Not Applicable	
City & State MIAMI, FL. 33182		City & State MIAMI, FL. 33182		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Zip Country		Zip Country		7. Name and Address of Current Registered Agent			

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Name: MARIA DEL C. VALDES
Street Address (P.O. Box Number is Not Acceptable):
957 N.W. 132ND CT
City: MIAMI FL Zip Code: 33182

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: *[Signature]* DATE: 5/18/02

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 \$180.00
After May 1. Fee is \$330.00
Amended UBR is \$81.25
Make Check Payable to Department of State

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

OFFICERS AND DIRECTORS		OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PSD VALDES MARIA DEL CARMEN 957 N.W. 32nd CT MIAMI, FL. 33182	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 holder of a trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* MARIA DEL CARMEN VALDES 4/15/02