2000 UNIFORM BUSINESS REPORT (UBR) FILED May 04, 2000 8:00 am Secretary of State DOCUMENT # P99000048186 1. Entity Name CAREMED, INC. "NAME CHANGED" 05-04-2000 90092 017 ***150.00 ACCION MEDICA 2000. INC. Mailing Address Principal Place of Business -0125 N.W. 53RD GT. 8125 N.W. 53RD-87. MIAMI-FL 33100 MIAMI FL 33166-4628-2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 141966 P.O. BOX Applied For 4. FEI Number City & State Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired U5# Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARTINEZ, OSVALDO Street Address (P.O. Box Number is Not Acceptable) **8125 N.W. 59RD ST**→ MIAMI FL 33166 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS hange TITLE TITLE Delete MARTINEZ, OSVALDO NAME NAME 16020 W. PRESTWICK PLACE STREET ADDRESS STREET ADDRESS 2100 S.W. 7TH AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33129 CEOT TITLE ☐ Delete TITLE MARTINEZ, OSVALDO NAME NAME 16020 W. PRESTWICK PLACE, HIAMI LKS FL. 33014 STREET ADDRESS STREET ADDRESS 2100 S.W. 7TH AVE. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33129** ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE Change Addition DITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address, with all other like empowered. reston SIGNATURE: _

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Affactivent 950ldes #PG9WD HUBO

December 13, 1999

CAREMED, INC. 8125 N.W. 53RD ST. MIAMI, FL 33166

Re: Document Number P99000048186

The Articles of Amendment to the Articles of Incorporation of CAREMED, INC. which changed its name to ACCION MEDICA 2000, INC., a Florida corporation, were filed on December 6, 1999.

Should you have any questions regarding this matter, please telephone (850) 487-6050, the Amendment Filing Section.

Thelma Lewis
Corporate Specialist Supervisor
Division of Corporations

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Letter Number: 299A00058525