2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P9900063858 Jul 20, 2000 8:00 am 1. Entity Name WORLDWIDE MEDICAL EVACUATION SERVICES, INC. **Secretary of State** 07-20-2000 90025 014 ***150.00 Principal Place of Business Mailing Address 984 WEST CAMINO ROAD 984 WEST CAMINO ROAD **BOCA RATON FL 33486 BOCA RATON FL 33486** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZEHMER, JOHN H Street Address (P.O. Box Number is Not Acceptable) 6620 SOUTHPOINT DRIVE SOUTH SUITE 200 JACKSONVILLE FL 32216 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 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 12. ☐ Addition TITLE TITLE ☐ Delete NAME SMOWTON, JEFFREY S M.D. NAME STREET ADDRESS STREET ADDRESS 12910 LITTLETON BEND RD. CITY-ST-ZIP CITY-ST-7IP JACKSONVILLE FL 32224 ☐ Change ☐ Addition Delete TITI F TITLE NAME DAWN, DEWILL III NAME STREET ADDRESS 984 WEST CAMINO REAL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33486** Addition Delete TITLE Change BORDELON, JOANN'T NAME^{*} STREET ADDRESS STREET ADDRESS 984 WEST CAMINO REAL CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33486** □ Change ☐ Addition 🗶 Delete TITLE TITLE FERNANDEZ N., ORLANDO J NAME NAME STREET ADDRESS STREET ADDRESS 17801 SOUTHWEST 46TH STREET CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33331 TITLE Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE 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.

SIGNATURE: JOSEPH SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VICE Prossured Treasured Treasu



Affachment 3850 DU 13225

July 14, 2000-

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: P99000063858

TO WHOM IT MAY CONCERN

As per instructed by Service Representative Grace, I was instructed to mail in our check for \$150.00 and a letter stating that we never received the first notice. I received the second notice and called our attorney who is the Registered Agent to see if it was mailed to him and he stated it was not. We never received the First Notice and humbly request that the penalty of \$400 be waived and our fee of \$150.00 accepted.

I appreciate you immediate attention to this matter

Respectfully,

JoAnn T. Bordelon

Vice president/Treasurer