

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90262 015 ***150.00

0370429 AV

DOCUMENT # S90578

1. Entity Name
CORPORATE CARE INTERNATIONAL, INC.

Principal Place of Business

**900 GLADES ROAD
 SUITE 3B
 BOCA RATON FL 33431
 US**

Mailing Address

**900 GLADES ROAD
 # 3B
 BOCA RATON FL 33431
 US**

2. Principal Place of Business

7700 Congress Avenue

Suite, Apt. #, etc.
#1102

3. Mailing Address

7700 Congress Avenue

Suite, Apt. #, etc.
#1102

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

65-0290237

Applied For

Not Applicable

Zip
33487

Country
USA

Zip
33487

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MESTER, HELENE
 900 GLADES RD
 #3B
 BOCA RATON FL 33431**

**Mester, Helene
 7700 Congress Avenue
 Suite # 1102
 Boca Raton, FL 33487**

7. Name and Address of New Registered Agent

Name

Mester, Helene

Street Address (P.O. Box Number is Not Acceptable)

7700 Congress Avenue Suite 1102

City **Boca Raton**

FL

Zip Code
33487

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

Helene Mester

Helene Mester

4/15/02

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) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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 **P** ☐ Delete
 NAME **MESTER, HELENE**
 STREET ADDRESS **900 GLADES ROAD, STE 3B**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **TVPS** ☐ Delete
 NAME **MESTER, LAURENCE**
 STREET ADDRESS **900 GLADES ROAD, STE 3B**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☐ Delete
 NAME **KIMMEL, CEIL**
 STREET ADDRESS **900 GLADES RD SUITE 3B**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **7700 Congress Avenue #1102**
 CITY-ST-ZIP **Boca Raton, FL 33487**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **7700 Congress Avenue #1102**
 CITY-ST-ZIP **Boca Raton, FL 33487**

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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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:

Helene Mester

4/15/2002

(561) 999-9494

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)