2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V39527

FILED May 01, 2002 8:00 AM Secretary of State

Entity Name: HEALTHCARE DEVELOPMENT ASSOCIATES INTERNATIONAL, INC.

| Current Principal Place of Business: | | | New Prince | New Principal Place of Business: | | |
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| | EDERAL HWY | | | | | |
| SUITE 210 SOCA RA |) TON, FL 3348' | 7 US | | | | |
| | ailing Addres | | New Maili | ng Addres: | ç. | |
| Juli Elit IVI | ailing Addres | .s. | New Main | ily Address | 3. | |
| | EDERAL HWY | | | | | |
| SUITE 210 BOCA RA | , TON, FL 3348 [.] | 7 US | | | | |
| El Number: | : 65-0336459 | FEI Number Applied For() | FEI Number Not App | licable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| 301 N FE | ITTER, CECILI. DERAL HWY | A L | | | | |
| 111 | | | | | | |
| OCA RA | TON, FL 3348 | | nurnose of changing i | te registere | d office or registered agent or both | |
| OCA RATHE ABOVE The above The State | named entity s e of Florida. | | purpose of changing i | ts registere | d office or registered agent, or both | |
| BOCA RATHE above the state | named entity see of Florida. | submits this statement for the | . , | ts registere | | |
| BOCA RATHE | named entity se of Florida. RE: Electron | submits this statement for the | ent | | d office or registered agent, or both Date | |
| iOCA RATHE ABOVE THE ABOVE THE STATE | named entity se of Florida. RE: Electron ation is eligible to | submits this statement for the ic Signature of Registered Agestating its Intangible Tax filing rea | ent | | | |
| BOCA RATHE ABOVE IN THE STATE SIGNATURE THIS CORPORATION CARE THE STATE | named entity se of Florida. RE: Electron ation is eligible to | submits this statement for the ic Signature of Registered Ag satisfy its Intangible Tax filing reg | ent quirement and elects to | do so (X). | | |
| The above the State of the Stat | named entity set of Florida. RE: Electron ation is eligible to mpaign Financing S AND DIRECT | submits this statement for the ic Signature of Registered Ag satisfy its Intangible Tax filing reg | ent quirement and elects to | do so (X). | Date | |
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I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KARA P. RICHARDSON VP 05/01/2002