

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V59453

FILED
Mar 12, 2003
Secretary of State

Entity Name: HEALTH MANAGED CARE NATIONAL, INC.

Current Principal Place of Business:

2901 SW 149 AVE
#170
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

2901 SW 149 AVE
#170
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 65-0516195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACKSON, W. CHARLES
8912 SW 142 AVENUE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

JACKSON, W. CHARLES
2901 SW 149 AVENUE
170
MIRAMAR, FL 33027 US

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: W. CHARLES JACKSON

03/12/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACKSON, W. CHARLES
Address: 8831 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: JACKSON, W. CHARLES
Address: 2901 SW 149 AVE # 170
City-St-Zip: MIRAMAR, FL 33027

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: W. CHARLES JACKSON

PCEO

03/12/2003

Electronic Signature of Signing Officer or Director

Date