

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT,  
IN AND FOR LEON COUNTY, FLORIDA

Department of Financial Services,  
Office of Insurance Regulation

Petitioner,

vs.

UNIMED  
Professional Liability Insurance Company, Ltd. (PLIC)  
PLIC Claims Management, Inc.  
Medical Risk Associates, R.P.G., Inc.  
Medical Risk Associates, R.P.G., Ltd.  
Physicians Malpractice Analysts, Inc.  
Mishima Murasaki  
James E. Reynolds  
Brooke C. Harris  
Matt Reed

Respondents.

03CA1402

CASE NUMBER:

Judge Francis

LEON COUNTY FLORIDA  
CIRCUIT COURT

ADOPTED  
03  
17 PM 12:35  
FILED  
CIVIL DIV.

PETITION FOR IMMEDIATE TEMPORARY RELIEF  
TO ENFORCE AGENCY ACTION

COMES NOW the Department of Financial Services, Office of Insurance Regulation, by and through the undersigned attorney, and hereby files this Petition For Immediate Temporary Relief to Enforce Agency Action, pursuant to Section 120.69(6) of the Florida Statutes, and as grounds therefore would state as follows:

1. This is an action to enforce the Immediate Final Order issued by the Office of Insurance Regulation of the Florida Department of Financial Services (hereafter, referred to as the "Office") on March 25, 2003, against the Respondents for violating Section 626.901, Florida Statutes, by soliciting Florida physicians, collecting premiums and selling medical professional liability insurance policies in this state, without a certificate of authority or other authority as required by Section 624.401, Florida Statutes. See Final Order attached as Exhibit A.

2. The Respondents, from offices in Georgia and the Caribbean, were selling medical professional liability insurance issued by Professional Liability Insurance Company (hereinafter "PLIC") to Florida physicians. The Respondents do not hold and have never held a certificate of authority issued by the Office of Insurance Regulation to engage in the transaction of insurance. The Respondents are not authorized to transact insurance anywhere. By transacting insurance in this state the Respondents are in violation of Sections 624.401 and 626.901 of the Florida Statutes.

3. The Office issued an Immediate Final Order requiring UNIMED, Professional Liability Insurance Company, Ltd. (PLIC), PLIC Claims Management, Inc., Medical Risk Associates, R.P.G., Inc., Medical Risk Associates, R.P.G., Ltd., Physicians Malpractice Analysts, Inc., Mishima Murasaki, James E. Reynolds, Brooke C. Harris, Matt Reed and Jerline Casio<sup>1</sup> to cease and desist from selling unauthorized insurance products, transacting insurance and otherwise holding itself out to be a medical malpractice insurer.

4. After the issuance of the Immediate Final Order and service on the Respondents, Respondents have continued to do business by collecting premiums from Florida physicians, in violation of the Immediate Final Order and in violation of Sections 626.901 (1)(h) and 624.401, Florida Statutes.

5. PLIC collected premiums, after the issuance of the Immediate Final Order and after service, from the practice of Drs. Abraham Chamely, and Mohammed Ismail, of NeuroCare Associates, in Broward County. NeuroCare Associates, specializing in neurology, has a policy for medical malpractice insurance that became effective on December 31, 2002 and expires on December 31, 2003. See attached Affidavit of Simone A. Sabga, Exhibit B.

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<sup>1</sup> A licensed Florida agent not included in this Petition.

6. PLIC collected a premium payment in the amount of \$7,822.24, from NeuroCare Associates by receiving and cashing check #5985, dated March 31, 2003, in violation of the Immediate Final Order and Section 626.901, Florida Statutes. See attached Check #5985, front and back, Exhibit C.

7. PLIC collected a premium payment in the amount of \$7,822.24, from NeuroCare Associates by receiving and cashing check #6021, dated April 30, 2003, in violation of the Immediate Final Order and Section 626.901, Florida Statutes. See attached Check #6021, front and back, Exhibit D.

8. PLIC has communicated to the office manager of NeuroCare Associates that PLIC is valid insurance and has failed to notify the practice, in violation of the Immediate Final Order, that PLIC and the other Respondents have been ordered to cease and desist from conducting insurance business in Florida.

9. The continued collection of premiums by the Respondents, in violation of the Immediate Final Order and of Section 626.901, Florida Statutes, presents an imminent and substantial threat to the public health, safety and welfare that justifies this agency's request for immediate temporary relief pursuant to Section 120.69 (6), Florida Statutes.

10. Pursuant to the Immediate Final Order and Section 626.901, the Office has requested that the Respondents stop collecting premiums, however counsel for the Respondents has communicated to the Office that the Respondents will continue collecting premiums. See attached letter dated May 29, 2003 signed by Karen Asher -Cohen, Esquire, Exhibit E.

11. The Respondents have further violated the Immediate Final Order by failing to send out notices to its Florida policyholders that it is unlicensed and has been ordered to cease

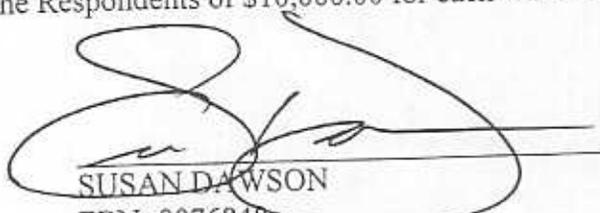
doing business in Florida and by failing to provide the office with a list of its Florida policyholders and other documentation.

12. Section 626.910, Florida Statutes, states that any unauthorized insurer or person representing such insurer transacting insurance in this state shall pay to the state a civil penalty of not more than \$10,000.00 for each willful violation of any lawful order of the department or any provision of this code.

13. Respondents have willfully violated the Immediate Final Order and the laws of the State of Florida, specifically Sections 626.901 and 624.401, Florida Statutes, by continuing to collect premiums on medical professional liability policies issued in this state, subsequent to the issuance of the Immediate Final Order and by failing to provide to the Office of Insurance Regulation, the information and documentation requested in the Immediate Final Order.

14. Respondents filed a notice of appeal with the First District Court of Appeal on April 24, 2003, that is now pending. The filing of the notice of appeal does not itself stay enforcement of the agency decision. See Section 120.68, Florida Statutes (2002).

**WHEREFORE**, the Petitioner prays for an order of enforcement of the Immediate Final Order issued by the Office of Insurance Regulation on March 25, 2003, against the Respondents and for a penalty against the Respondents of \$10,000.00 for each willful violation of the Immediate Final Order.



SUSAN DAWSON

FBN: 0076848

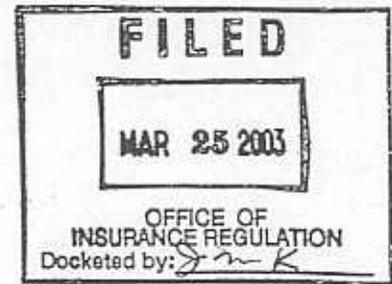
Office of Insurance Regulation  
Division of Legal Services  
200 East Gaines Street, 6<sup>th</sup> Floor  
Tallahassee, Florida 32399  
Telephone: 850/ 413-4195  
Facsimile: 850/413-0549

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**EXHIBIT A**



OFFICE OF INSURANCE REGULATION



KEVIN M. MCCARTY  
DIRECTOR

IN THE MATTER OF:

UNIMED  
Professional Liability Insurance Company, Ltd. (PLIC)  
PLIC Claims Management, Inc.  
Medical Risk Associates, R.P.G., Inc.  
Medical Risk Associates, R.P.G., Ltd.  
Physicians Malpractice Analysts, Inc.  
Mishima Murasaki  
James E. Reynolds  
Brooke C. Harris  
Matt Reed  
Jerline Ann Cascio

Case No.: 66336-03-CO

IMMEDIATE FINAL ORDER

TO:

UNIMED  
5920 Roswell Road  
N.E. Bldg., 107. suite 332  
Atlanta, GA 30328

UNIMED  
6025 Sandy Springs Circle  
Suite 312  
Atlanta, GA 30328

UNIMED  
6151 Powers Ferry Road,  
Suite 600  
Atlanta, GA 30328

Professional Liability Insurance Company, Ltd. (PLIC)  
10 Queen Street  
Hamilton, HM 11  
Bermuda

**Professional Liability Insurance  
Company, Ltd. (PLIC)**  
10 Queen Street  
Hamilton, HM 11  
St. Vincent

**Professional Liability Insurance  
Company, Ltd. (PLIC)**  
10 Queen Street  
Hamilton, HM 11  
Grenadines

**PLIC Claims Management, Inc.**  
6065 Roswell Road  
Suite 1186  
Atlanta, GA 30328

**Medical Risk Associates, R.P.G., Inc.**  
48 Par-la-ville Road  
Suite 378  
Hamilton HM 11, Bermuda

**Medical Risk Associates, R.P.G., Ltd.**  
48 Par-la-ville Road  
Suite 378  
Hamilton HM 11, Bermuda

**Physicians Malpractice Analysts, Inc.**  
6151 Powers Ferry Road,  
Suite 600  
Atlanta, GA 30328

**Mishima Murasaki**  
48 Par-la-ville Road  
Suite 378  
Hamilton HM 11, Bermuda

**James E. Reynolds**  
6065 Roswell Road  
Suite 1186  
Atlanta, GA 30328

**Brooke C. Harris**  
6025 Sandy Springs Circle  
Suite 312  
Atlanta, GA 30328

**Matt Reed**  
6025 Sandy Springs Circle  
Suite 312  
Atlanta, GA 30328

**Jerline Ann Cascio**  
4639 Tiffany Woods Circle  
Oviedo, FL 32765-6104

**YOU ARE HEREBY NOTIFIED** that pursuant to the Florida Insurance Code, including Section 624.307 of the Florida Statutes, the State of Florida, Office of Insurance Regulation (hereinafter referred to as the "OFFICE") of the Financial Services Commission within the Department of Financial Services, has caused an investigation to be made of the insurance-related activities of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO.

PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., will hereafter be referred to as, "PLIC".

As a result of that investigation, the OFFICE finds:

1. Section 624.401, Florida Statutes, states that no person shall act as an insurer, and no insurer or its agents, attorneys, subscribers, or representatives shall directly or indirectly transact insurance in this state except as authorized by a subsisting certificate of authority issued to the insurer by the department.
2. Section 120.569(2)(n), Florida Statutes, provides that "if an agency head finds that an immediate danger to the public health, safety or welfare requires an immediate final order, it shall recite with particularity the facts underlying such finding in the final order..."
3. UNIMED and PLIC are currently unlicensed and unauthorized to transact insurance in Florida. UNIMED and PLIC have never held a license or certificate of authority to transact insurance in Florida. The Office of Insurance Regulation has no evidence or information that UNIMED and PLIC are licensed anywhere outside of the United States.

4. Despite the absence of any certificate of authority or any other authorization to transact insurance business in Florida, UNIMED and PLIC have engaged and **currently engage** in the unlicensed, unauthorized, and illegal business of insurance covering subjects of insurance located or expressly to be performed in this state at the time of issuance, in violation of the Florida Insurance Code including, Sections 624.401, and 626.901, Florida Statutes.

5. PLIC is an offshore entity, listing its address as either being in Bermuda, St. Vincent, or the Grenadines. Specifically, it acts as a risk-bearing entity for medical malpractice liability. It also does so by and through principals, promoters, agents, or representatives, some of whom are located in Florida, and many of whom are not licensed to transact insurance business in Florida as required by Sections 626.112, Florida Statutes, and other provisions of the Florida Insurance Code. They include UNIMED, MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO.

6. Section 624.401(4), Florida Statutes, states that it is a felony of the third degree for any person to act as an insurer, transact insurance, or otherwise engage in insurance activities in this state without a certificate of authority. In accordance with Section 626.902, Florida Statutes, it is also a third degree felony to aid or represent an unauthorized insurer.

7. UNIMED, from offices and by personnel located in Atlanta, Georgia, negotiated and solicited insurance contracts for medical professional liability on behalf of PLIC to medical professionals in Florida for coverage to be performed in Florida, in violation of Section 626.901, Florida Statutes.

8. UNIMED disseminated information as to coverage and rates for medical professional liability coverage to be provided by PLIC to medical professionals in Florida for coverage to be performed in Florida, in violation of Section 626.901, Florida Statutes.

9. UNIMED forwarded applications for medical professional liability coverage to be provided by PLIC to medical professionals in Florida for coverage to be performed in Florida, in violation of Section 626.901, Florida Statutes.

10. JERLINE ANN CASCIO is a licensed Florida insurance agent (#A148602).

11. On or about September 18, 2002, JERLINE ANN CASCIO, from offices located in Florida, offered medical professional liability insurance coverage to be issued by PLIC to Dr. Goldsmith as an "alternative option".

12. JERLINE ANN CASCIO, in violation of Section 626.901(1)(b), Florida Statutes, disseminated information as to coverage and rates for PLIC to Dr. Goldsmith for medical professional liability insurance to be performed in the State of Florida. JERLINE ANN CASCIO, in violation of Section 626.901(1)(c) of the Florida Statutes, forwarded two company forms for PLIC to Dr. Goldsmith. See attached Exhibit (A).

13. JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED and MISHIMA MURASAKI, are not licensed Florida insurance agents.

14. JAMES E. REYNOLDS, identifying himself as V.P. of PLIC CLAIMS MANAGEMENT, INC., solicited Dr. Angel J. Docobo, of Tampa, Florida, with a letter signed by MISHIMA MURASAKI on behalf of PLIC, assisting PLIC in the transaction of insurance in violation of Section 626.901(1)(a), Florida Statutes. See attached Exhibit (B).

15. MEDICAL RISK ASSOCIATES, R.P.G., Ltd., disseminated information as to coverage and rates; forwarded premiums; forwarded applications and procured insurance

contracts on behalf of PLIC, to Dr. Docobo, in violation of Section 626.901, Florida Statutes. See attached Exhibit (C).

16. BROOKE C. HARRIS, on behalf of UNIMED, disseminated information as to coverage and rates to Dr. Docobo by way of a Coverage Proposal with a supporting premium quote for medical malpractice liability insurance coverage to be effective December 31, 2002, in violation of Section 626.901, Florida Statutes. See attached Exhibit (D).

17. MATT REED, an employee of UNIMED, in violation of Florida Statutes 626.901, disseminated information as to coverage and rates to Dr. Nile R. Lestrangle of Pompano Beach, Florida, for medical professional liability insurance coverage to be provided by PLIC. MATT REED, in violation of Section 626.901, Florida Statutes, disseminated information as to PLIC coverage and rates to Kidz Medical Services of Boca Raton, Florida. See attached Exhibit (E)

18. MEDICAL RISKS ASSOCIATES R.P.G., INC., disseminated information as to coverage and rates; and solicited insurance contracts for Dr. Lestrangle, with PLIC, in violation of Section 626.901 Florida Statutes. See attached Exhibit (F).

19. PLIC has issued a Certificate of Insurance, for a policy period of July 1, 2000 through July 1, 2001, for medical malpractice (professional) liability insurance in Florida to Dr. Maria A. Carballosa of Miami, Florida. MISHIMA MURASAKI signed the Certificate of Insurance as the "authorized representative" of PLIC. See attached Exhibit (G). PLIC, in delivering said Certificate of Insurance, disseminating such information as to its polices and rates, and collecting premiums, has violated Sections 626.901 and 624.401 of the Florida Statutes.

20. PLIC has issued a Certificate of Insurance, for a policy period of December 1, 2002 through December 1, 2003, for medical malpractice (professional) liability insurance in Florida

to Dr. Aldo Blanco of Miami, Florida. MISHIMA MURASAKI signed the Certificate of Insurance as the "authorized representative" of PLIC. See attached Exhibit (H). PLIC, in delivering said Certificate of Insurance, disseminating such information as to its policies and rates, and collecting premiums, has violated Sections 626.901 and 624.401 of the Florida Statutes.

21. PHYSICIANS MALPRACTICE ANALYSTS, INC., shares the same office address as UNIMED. PHYSICIANS MALPRACTICE ANALYSTS, INC., from offices shared with UNIMED is engaging in the unauthorized transaction of insurance, in violation of Section 626.901, Florida Statutes.

22. Neither UNIMED, PLIC, nor any of the other entities or persons named in this Immediate Final Order are subject to any exception to the requirement of the Florida Insurance Code, including exceptions outlined in Section 624.402 of the Florida Statutes, for licensure to transact insurance in Florida, nor are they subject to any exception to the requirements of the Surplus Lines Law, Sections 626.913 - 626.937.

23. Agents, representatives, and promoters of PLIC, including, UNIMED, MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI (a principal of PLIC), JAMES E. REYNOLDS (a principal of PLIC Claims Management, Inc.), BROOKE C. HARRIS (a principal of UNIMED), MATT REED (a principal of UNIMED), and JERLINE ANN CASCIO, have violated provisions of the Florida Insurance Code, including Section 626.901, by disseminating information as to coverage and rates; forwarding applications for; soliciting the sale of; selling; delivering policies or contracts for medical malpractice insurance;

and fixing rates for such insurance to medical doctors and other health care professionals in Florida, some of whom include:

Dr. Angel J. Docobo	Tampa, Florida
Dr. Nile R. Lestrangle	Pompano Beach, Florida
Dr. Maria A. Carballosa	Miami, Florida
Dr. Franklin Guttman	West Palm Beach, Florida
Dr. Aldofo Blanco	Miami, Florida

24. The unlicensed, unauthorized, and therefore illegal, transaction of insurance by UNIMED and PLIC presents an immediate danger to the public health, safety or welfare of Florida residents.

25. On or about February 11, 2002, the State of Alabama Department of Insurance issued an Order against Professional Liability Insurance Company, Ltd., PLIC Claims Management, Inc., Mishima Murasaki, UNIMED, and Medical Risk Associates, R.P.G., among others, to cease and desist all transactions of insurance.

26. On or about February 3, 1995, the Texas Commissioner of Insurance issued an Order (#C-95-079) for Professional Liability Insurance Company, Ltd. and Physicians Malpractice Analysts, Inc., to cease and desist engaging in the unauthorized business of insurance in Texas. On or about June 4, 1997, Professional Liability Insurance Company, Ltd., was assessed an administrative penalty of \$210,000.00 for various violations of the 1995 Order.

27. Based upon the foregoing, the OFFICE finds that UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E.

REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO are engaging in the unauthorized and therefore illegal business of insurance in Florida in violation of the Florida Insurance Code including, Sections 624.401, and 626.901, Florida Statutes.

WHEREFORE, pursuant to the Florida Insurance Code and other applicable statutes, including, Sections 120.569(2)(n), Florida Statutes, the OFFICE finds that the continued transaction of insurance without licensure by UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd. (PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO, and in violation of the Florida Insurance Code, constitutes an immediate danger to the public welfare so as to require the issuance of this Immediate Final Order.

Accordingly, IT IS HEREBY ORDERED:

A). UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd. (PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO, whether acting in the State of Florida as an insurer, a purchasing retention group, an insurance agent, an insurance agency, an insurance adjuster, a third-party administrator, a managing general agent, or otherwise engaging in the business of insurance, either directly or indirectly through named and unnamed persons, entities, agents, or otherwise, shall forthwith CEASE AND DESIST from the transaction of any new or renewal insurance business, including acting or holding itself out to be a medical malpractice insurer.

B). UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd. (PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO shall forthwith notify, in writing, each and every agent, broker, salesperson, and other marketing outlet that is presently or that has in the past been used to solicit, sell, or deliver its products in Florida of the cessation of the Florida business of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd. (PLIC), and PLIC CLAIMS MANAGEMENT, INC., because they are unlicensed, and shall also inform such persons and entities that no further applications will be accepted nor contracts issued. The above-named entities and individuals shall further direct each and every agent, broker, salesperson, and other marketing outlet, in writing, to forthwith offer to replace the medical malpractice coverage of each client, and person or entity afforded coverage under a policy or contract issued or underwritten by any of them with substantially comparable coverage provided by a Florida authorized insurer or eligible surplus lines carrier.

UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO shall furnish for approval or edit a draft of such notification to the OFFICE within five (5) days of this Immediate Final Order. They shall thereafter, within five (5) days of receipt by mail or by fax of the OFFICE's approval or edits, mail such letter (in revised form if edited by the OFFICE) to all such agents, brokers, salespersons, and other

marketing outlets, and shall immediately thereafter file the sworn attestations of each officer, director, general partner, member, and limited partner of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO that there has been full compliance with this provision.

C). UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO shall forthwith notify in writing each person or entity in Florida that was insured under any policy, contract, or certificate of coverage issued by or on behalf of, and to which has been furnished a certificate of coverage as evidence of medical malpractice insurance through UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., of the cessation of their business in Florida because they are unlicensed, and that each such person or entity should immediately obtain medical malpractice coverage from an authorized insurer or eligible surplus lines carrier.

UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and

JERLINE ANN CASCIO shall furnish for approval or edit a draft of such notification to the OFFICE within five (5) days of this Immediate Final Order. They shall, thereafter, within five (5) days of receipt by mail or by fax of the Department's approval or edits, mail such notice (in revised form if edited by the OFFICE) to each such subscriber, member, beneficiary, and applicant, and shall immediately thereafter file the sworn attestations each officer, director, member, general partner, and limited partner of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO that there has been full compliance with this provision.

D). UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO shall, within fifteen (15) calendar days from the date hereof, deliver to the OFFICE all documents, materials, and things that are itemized on the attached Exhibit "I". The materials shall be accompanied by the sworn attestations of each officer, director, member, general partner, or limited partner of, UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO that they

the defense and payment of claims. For the protection of the public, and to preserve books, records and assets of, UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., neither it nor its officers, directors, general partners, limited partners, employees, nor MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO shall take or permit any action that might waste, conceal or otherwise dispose of the assets, property, books, records, and accounts of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC.

G). The entry of this Immediate Final Order, or any amendment thereto, shall not be interpreted as having, nor shall it have, the effect of abrogating any statutory, common law, or contractual rights of any person or entity insured by or who or which may be a third-party beneficiary of, coverage under any UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., policy, contract, or certificate of coverage, nor of any person or entity that has relied upon the existence of a policy, contract, or certificate of coverage with UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), and PLIC CLAIMS MANAGEMENT, INC in granting or allowing any right, privilege, or chose in action.

H). The issuance of this Immediate Final Order and the procedural safeguards set forth herein are concluded to be fair under the circumstances due to the potential grave harm resulting from unauthorized insurance entities engaging in the business of insurance in Florida. A Notice of Intent to Issue a Cease and Desist Order and Assess Penalty will be issued immediately

following this Immediate Final Order. Procedures set forth therein afford UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd.(PLIC), PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., PHYSICIANS MALPRACTICE ANALYSTS, INC., MISHIMA MURASAKI, JAMES E. REYNOLDS, BROOKE C. HARRIS, MATT REED, and JERLINE ANN CASCIO the opportunity to request a proceeding pursuant to Section 120.57, Florida Statutes.

DONE AND ORDERED this 25th day of March, 2003.



  
KEVIN M. MCCARTY  
Director of the Office of Insurance Regulation

### NOTICE OF RIGHTS

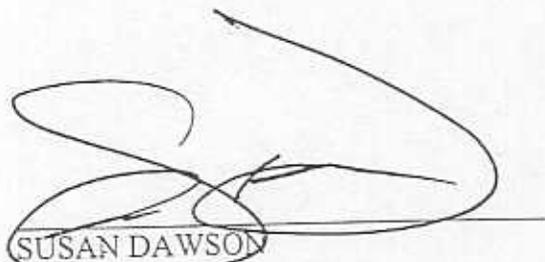
You are hereby notified pursuant to Section 120.569(1), Florida Statutes, that you have the right to request a hearing. The request for hearing must be in writing and filed with the OFFICE within five (5) days of the receipt of this Order, excluding weekends or holidays. If a written request is timely filed, the affected party(ies) will be given an opportunity for a hearing at a convenient time in Tallahassee, Florida. The hearing will be limited to a review of the finding that the facts recited present an immediate threat to the public health, safety, and welfare sufficient to justify the entry of this Immediate Final Order. Failure to file a request for a hearing within five (5) days constitutes a waiver, and no Hearing will be held.

Any party to these proceedings adversely affected by this Order is entitled to seek review of this Order pursuant to Section 120.68, Florida Statutes, and Rule 9.110, Fla.R.App.P. Review proceedings must be instituted by filing a petition or notice of appeal with the General Counsel, acting as the agency clerk, at 612 Larson Building, Tallahassee, Florida 32399-0333, and a copy of the same with the appropriate district court of appeal, within thirty (30) days of rendition of this Order.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing **Immediate Final Order** has been sent by Certified Mail this 25th day of March, 2003 to, and shall forthwith be served upon the following at the addresses listed on pages 1 and 2 of this Order:

UNIMED (at all three addresses listed)  
Professional Liability Insurance Company, Ltd. (PLIC) (at the addresses listed for Bermuda,  
St. Vincent and the Grenadines)  
PLIC Claims Management, Inc.  
Medical Risk Associates, R.P.G., Inc.  
Medical Risk Associates, R.P.G., Ltd.  
Physicians Malpractice Analysts, Inc.  
Mishima Murasaki  
James E. Reynolds  
Brooke C. Harris  
Matt Reed  
Jerline Ann Cascio



SUSAN DAWSON

FBN: 0076848  
Office of Insurance Regulation  
Division of Legal Services  
200 East Gaines Street, 6<sup>th</sup> Floor  
Tallahassee, Florida 32399  
Telephone: 850/ 413-4195  
Facsimile: 850/413-0549

**EXHIBIT A**

10/03/2002 02:00 8504886015  
09/28/2002 10:23 813 Subd. 5  
Sep 18 02 07:50 Jeri Cascio

DEPT OF INSURANCE

PAGE 03/13

FL DEPT OF I.  
TAMPA BAY SURG CENTR  
407-959-9451

PAGE 03  
PAGE 02/12  
P. 1

## WINCHESTER INSURANCE

Coverage with confidence since 1919

Jeri Cascio, AAI, CPIW, Agent

Professional Liability Specialist

P.O. Box 624969

1425 W. Broadway, Oviedo, FL 32762-0969

Phone (407) 365-5656 800-393-5656 Fax (407) 366-0031

E-mail: [Jeri@winchesterinsurance.com](mailto:Jeri@winchesterinsurance.com)

A 148602

Date: 9/18/02  
TO: Dr. Goldsmith  
FX: 813 685 9178 - 7 pages  
PH: 813 684 2663  
FR: Jeri Cascio  
RE: Medical Professional Liability - alternative Option - Quotes PLIC

To follow our conversation, this is complimentary referral information provided to you as an alternate risk transfer source for your malpractice coverage since you have no other current options available. We understand you are seeking alternate coverage and have had no success in the available insurance marketplace. You are currently insured with the State Program (FMMDUA) paying in excess of \$100k premium, which is also assessable for up to one third additional if this program has a deficit. We understand that PLIC is licensed with the State of Florida Dept. of Insurance, and their policy form meets the physician licensing requirements. We are not affiliated with PLIC and offer this as an alternative for you to consider along with other options presented from Insurance Companies we are affiliated with including: TIG, GenStar & Eversten.

TIG offers broader coverage and I will be happy to review the differences with you at your convenience. TIG will need an AGENT OF RECORD letter to update their quotation (attached is a copy in case you wish to do this). Please feel free to call me #800-393-5656 ext. 112.

Await your advice.

Thank you.



Jeri

10/03/2002 02:00 8504885015  
09/20/2002 10:23 813... 05

DEPT OF INSURANCE  
FL DEPT OF I  
TAMPA BAY SURG

PAGE 10/13  
PAGE 10  
PAGE 05/12

*Winchester Insurance, Inc.*  
Coverage with confidence since 1919  
Jeri Cascio, AAI, CPIW, Agent, Professional Liability Specialist  
1425 W. Broadway - SR 426  
Oviedo, FL 32762-0969  
407-365-5656 or 800-393-5656  
fax 407-366-0031

*4 p + 8*

September 18, 2002

TO: Dr. Goldsmith  
> Office FAX#813 685 9178 PH#684 2663 Cell# 390 2600

FROM: Jeri Cascio

RE: PLIC medical prof. Liability information  
- revised downpayment info and form to sign/return

To follow my voice mail today, attached is a copy of original quote (revised down payment) along with 2 company forms to sign and return directly to PLIC with the premium down payment - IF you wish to bind this coverage through them.

Please call me at your earliest convenience so we can discuss the advantages and disadvantages of this option so you can make a more informed decision.

I look forward to hearing back from you soon!

Thank you for this opportunity to be of service.

*Jeri*

Jeri  
#800-393-5656 x112

**R.P.G. ASSOCIATION PROGRAM QUOTATION  
PROFESSIONAL LIABILITY INSURANCE GROUP**

*\* Revised  
down  
payment  
PLIC*

Named Insured: **Stuart Goldsmith, MD**  
TO BE EFFECTIVE: 10/1/02 to 10/1/03 Retro 10/1/02

Insurance Co.: Professional Liability Insurance Corp. (PLIC)  
Coverage: Medical Professional Liability (Complies with MD's FL statute license requirements)  
Type: Claims Made Coverage with No Prior Acts coverage - Retro Inception  
Limits: \$250,000/\$750,000 limit/aggregate  
Deductible: \$10,000 each claim  
PREMIUM: **\$48,301** (annual premium which includes \$500 association membership fee)

\* Payment Required to Bind: **\$6,475.12 DOWN** (see attached forms to sign/return)  
20% down (~~\$9,661~~) payable to PLIC which must be received along with your signed quote at least 48 hours prior to your desired effective date (since 10/1/02 is desired, suggest express overnight mailing on 9/25/02 to PLIC's Program Administrator's office - UNIMED office attention Matt Reed at 6025 Sandy Springs Cr. Ste. #312, Atlanta GA 30328 PH#800-967-9772) Policy Binder will be issued/sent and within 30 days new PLIC policy will be issued direct from Company.

PLIC Program and Coverage Highlights:

- Non-assessable Program
- Meets State of Florida Statutory MD Licensing Requirements (however, not part of FL Guarantee Fund)
- Company Experience - The program administrator, Unimed, has been successfully in operation for past 13 years; the insurance carrier, PLIC has been writing professional liability for physicians for almost 20 years.
- Tail - Claims Made policy form with Extended Reporting Option/TALE available at 200% of expiring premium; 2 year tail FREE after 5 years of continuous coverage for retirement from medicine.
- Claim trigger - lawsuit filed for damages
- Defense & Legal Costs of claims is INSIDE the limit of liability (limited form/no license defense coverage)
- No Medicare/Medicaid defense coverage available
- Excellent Claims defense - only experienced malpractice attorney's are utilized and fees are NOT capitated

NAMED INSURED: Stuart Goldsmith MD  
PROGRAM ADMINISTRATOR - Unimed Physician Malpractice Source #800-967-9772  
CLAIMS MANAGER: Jim Reynolds, Attorney: #770-955-7542  
INSURANCE COMPANY - Professional Liability Insurance Corp.  
Risk Purchasing Group through Medical Risk Associates R.P.G. Inc. - Bermuda (see enclosed information)

\*NOTE-Agent/UNIMED does not have binding authority with PLIC, therefore binder must be issued by authorized company. Binder issued within 48 hours of receipt of premium and final underwriting approval of company applications and additional underwriting information as required- IF any. Quote based on the following basic information you provided:

	<u>FL License#</u>	<u>Retro Date</u>
<b>Stuart Goldsmith, MD</b>	ME0030636	10/1/02 (inception)

- Specialty: Ortho - NO spine surgery
- Current coverage with State Program - FMMJUA (assessible program)
- PreNational Ins. Co. Application used for quotation - on file - PLIC form may be required to be advised
- Claim History - 2 claims (1997 for \$25,000 and 2000 for \$95,000 both settled by prior Ins. Co.)

This is complimentary referral information provided to you as an alternate risk transfer source for your malpractice coverage since you have no other current options available. We understand you are seeking alternate coverage and have had no success in the available insurance marketplace. You are currently insured with the State Program (FMMJUA) paying in excess of \$100k premium, which is also assessible for up to one third additional if this program has a deficit. We understand that PLIC is licensed with the State of Florida Dept. of Insurance, and their policy form meets the physician licensing requirements. We are not affiliated with PLIC and offer this as an alternative for you to consider along with other options presented from insurance companies: TIG, GenStar & Evanston. Await your advice. Thank you, Jeri Cascio

SEP. 18. 2002 12:09PM

NO. 350 F. 2

Medical Risk Associates R.P.G., Inc.  
Suite 378  
48 Par-la-ville Road  
Hamilton HM 11, Bermuda

Membership Director:

By and through the elective benefits of my international membership with Medical Risk Associates R.P.G., I hereby acknowledge my independent and direct procurement of alternative malpractice insurance coverage not otherwise available through other sources from Professional Liability Insurance Co., Ltd., a bonded and duly licensed insurance carrier chartered under British laws of the United Kingdom.

Date: \_\_\_\_\_ Applicant/Insured Signature: \_\_\_\_\_  
Stuart Goldsmith, M.D.

Policy Period	Effective: <u>10-01-02</u>	Expires: <u>10-01-03</u>
	Retroactive Date: <u>None</u>	
Limits of Liability	Per Claim: <u>\$ 250,000.00</u>	Aggregate: <u>\$ 250,000.00</u>
Deductible	Per Claim: <u>\$ 10,000.00</u>	
Annual Premium: \$	<u>47,801.00</u>	
Membership Fee: \$	<u>500.00</u>	
Total:	\$ <u>48,301.00</u>	

\*\*\* Initial payment of: \$6,475.12 due on or before effective date.  
*payable TO PLIC*

Additional Installment Schedule	
<u>7</u>	Installments in the amount of <u>\$5,975.12</u> , due on the <u>1st</u> day of each month thereafter until paid in full.

**EXHIBIT B**



*WITH COMPLIMENTS FROM*

**James E. Reynolds, V.P.  
PLJC Claims Management, Inc.**



6065 Roswell Rd.  
Suite 1186  
Atlanta, Ga. 30328  
Telephone: (770) 955-7542



PROFESSIONAL LIABILITY  
INSURANCE COMPANY, LTD.

*A Member of the  
CROWNE GLOBAL GROUP, LTD.  
An International Consortium*

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*Per your request  
with our  
COMPLIMENTS!*

Dear Subscriber,

Per your request, we are glad to share some requested information regarding PLIC.

PLIC was founded by Dr. Charles Bailey, a renowned cardiac surgeon (Nobel Prize nominee) and attorney who served on the Board of Directors of major medical malpractice insurance companies. As a pioneer in the field of heart surgery, he earned the select and rare privilege of appearing on the front cover of *TIME* magazine; Dr. Bailey recognized that the science of medicine could not be enhanced without inherent risks.

As a doctor/attorney, he was troubled by the rapid increase of medical malpractice litigation and the disproportionate amount of awards being dispensed by juries in this country. As a physician, he recognized the amount of years, sacrifice and dedication invested by doctors in their commitment to mankind. As such, he became disgusted in witnessing doctors under seize motivated by a litigious society seeking disproportionate financial windfalls, while equally acknowledging that a few doctors were reckless in the performance of their profession, the notoriety of such instances served only to encourage the abundance of frivolous malpractice claims.

Thus combining his experience and achievements as a noted physician, further enhanced by his practice of law and insurance knowledge, Dr. Bailey helped influence a consortium of Japanese insurance companies to financially enhance the initial \$3,000,000.00 investment in PLIC. Consequently, it became the objective of Dr. Bailey to have PLIC extend solid coverage to physicians at reasonable premium rates. As a physician, he knew that next to other overhead factors, the cost of medical malpractice insurance is the heaviest cost of practicing medicine. However, as an attorney, he disagreed with the latest requirements that insurance companies must report all claims to the National Medical Registry, regardless if a claim was merely settled for a minimum consideration, solely due to economic principles.

Therefore, in order to achieve both objectives, PLIC was licensed and chartered under the laws of St. Vincent=s, West Indies, in accordance with the highly respected insurance statutes of the British Commonwealth. As such, it has enabled PLIC direct access to worldwide re-insurance companies such as Lloyds of London without incurring domestic surcharges.

Additionally, due to its exceeding capitalization and non-domestic charter, the financial benefits of PLIC's nontaxable status serve to incorporate its tax savings unto its doctors' premiums. Thus, Dr. Bailey's initial prudent principle objective was acquired. Secondly, each PLIC policy is reinsured by Global Insurance Company headquartered at: Hara Building 2, 4th Floor, 15-6 Shiba 4 Chome, Minato-Ku, Tokyo, Japan 108. Today, PLIC (as a subsidiary of the Crowne Global Group), together with Kobe Reinsurance and Dai Ichi Reinsurance Companies, have combined earnings in excess of \$117,000,000.00.

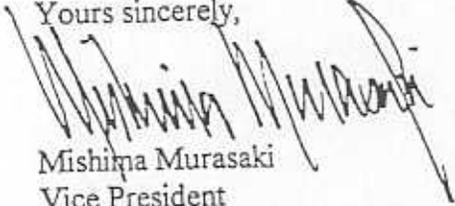
The initial combined members of the Board of Directors consist of Messrs. C. Bailey, Z. Konishi, Y. Koga, T. Konno, S. Mikimoto, H. Amada, M. Togii, T. Toda, M. Miyagawa and K. Kawahara. Our auditors are Deloitte, Touche, Tohmatsu and Callens, Pirenne & Co. Upon completion of our current fiscal year, we will be proud to extend our policyholders a copy.

In essence, our philosophy at PLIC is that all our policyholders become a member of our exclusive family dedicated in supporting their endeavors and protecting their financial assets. We share their concerns over an out-of-control litigious environment and remain committed to protecting their assets.

We maintain attorneys with impeccable credentials - specialists in defending medical malpractice claims. Unlike many other carriers, upon renewals, we do not disown them as a family member merely because they have become the target of a claim. Equally, the renewal rates are commensurate with competitive underwriting principles. We fully recognize that our success is enhanced by long-term associations and referrals by our family of policyholders, year-in, year-out!

Thanking you for your courtesy and consideration, we remain,

Yours sincerely,



Mishima Murasaki  
Vice President

MM:tp

Within this one square mile  
of the city of Hamilton  
rests the secret of our success.



From Pitt's Bay Road to  
Parliament Street...just four short  
blocks wide and about three deep...  
you will find a concentrated  
mecca for the insurance buyer.  
It's all here.

The brokers, the intermediaries,  
the big CATS, the little captives,  
the bankers, lawyers, auditors and  
insurance professionals who form the  
experienced work force, and most



importantly billions of dollars  
in unencumbered capital.  
Combine that with the latest  
in fibre optic communication  
technology and a successful  
Industry/ Government  
Partnership and you'll  
understand why industry  
leaders say "There is no better  
place to do business."

And you can walk to every meeting.



# BERMUDA

THE PREMIER OFFSHORE DOMICILE FOR INSURANCE, MANAGEMENT AND FINANCIAL REINSURANCE

For more information call or write to: The Insurance Information Office  
The Bermuda Insurance Institute, P.O. Box HM 2911, Hamilton HM LX, Bermuda.  
Telephone: 441-292-9829 Fax: 441-295-3532



**ST. VINCENT & THE GRENADINES**

Chambers - White Chapel

P.O. Box 1281

St. Vincent, W.I.

**BERMUDA**  
10 Queen Street  
Hamilton HM 11  
Bermuda

**BERMUDA**  
48 Par-la-Ville Road  
Suite 378  
Hamilton HM 11  
Bermuda

**GRAND CAYMAN**  
Transnational House  
West Bay Road  
Grand Cayman, B.W.I.

**UNITED KINGDOM**  
St. Paul's House  
Warwick Lane  
London, EC4D-4BN  
England

**BAHAMAS**  
29 Retirement Road  
Nassau, Bahamas

**EXHIBIT C**

TELECOPIER COVER SHEET

TO: Angel Docobo, M.D.

TELECOPIER NO: 813-877-4368 DATE: 12-06-02

FROM: PLIC TIME: \_\_\_\_\_

RE: Please sign and date the attached pages and forward them together  
with your initial premium payment in the amount of \$ 4,239.00  
made payable to "PLIC." Please forward ASAP to your respective  
Agent / Broker's address in order to activate your pre-approved  
coverage. We appreciate your business!

Number of Pages Being Sent (Including Cover Sheet): 3

THIS COMMUNIQUE IS IN RESPONSE BY THE SENDER PURSUANT TO A DIRECT PROCUREMENT REQUEST BY THE RECIPIENT AND CONTAINS INFORMATION WHICH IS CONFIDENTIAL, PRIVILEGED OR OTHERWISE NOT SUBJECT TO DISCLOSURE BY ANY OF THE PARTIES. NOTHING CONTAINED IN THIS DOCUMENT, ATTACHMENTS OR CONTRACTS ARE TO BE CONSIDERED, DEEMED OR INTERPRETED AS A SOLICITATION BY THE SENDER TO THE RECIPIENT IN ANY MANNER WHATSOEVER.

Medical Risk Associates R.P.G. Inc  
Suite 378  
48 Par-la-ville Road  
Hamilton HM 11, Bermuda

Membership Director:

By and through the elective benefits of my international membership with Medical Risk Associates R.P.G., I hereby acknowledge my independent and direct procurement of alternative malpractice insurance coverage not otherwise available through other sources from Professional Liability Insurance Co., Ltd., a bonded and duty licensed insurance carrier chartered under British laws of the United Kingdom.

Date: \_\_\_\_\_ Applicant/Insured Signature: \_\_\_\_\_

Angel Docobo, M.D.

Policy Period	Effective: <u>12-31-02</u>	Expires: <u>12-31-03</u>
	Retroactive Date: <u>04-01-89</u>	
Limits of Liability	Per Claim: \$ <u>250,000.00</u>	Aggregate: \$ <u>750,000.00</u>
Deductible	Per Claim: \$ <u>10,000.00</u>	
Annual Premium:	\$ <u>18,698.00</u>	
Membership Fee:	\$ <u>500.00</u>	
Total:	\$ <u>19,198.00</u>	

\*\*\*Initial payment of: \$ 4,239.00 due on or before effective date.

**Additional Installment Schedule**

4 installments in the amount of \$ 3,739.00, due on the 31st day of each month thereafter until paid in full.

**EXHIBIT D**



"The Physicians  
Malpractice  
Insurance  
Source"

Fax # (813) 877-4368

Dear Dr. Docobo,

We genuinely thank you for giving us the opportunity to extend an estimated quote for medical Malpractice coverage.

The recent estimated quote, based upon your initial representations, is subject to approval by the Designated carriers underwriters upon receipt of:

- A fully completed application.
- A copy of your current "Declaration of Coverage" (Dec-Sheet).
- Any other documents in support of the application.
- Acceptance of quote.

### COVERAGE PROPOSAL

LIMITS: 250,000-750,000 . EFFECTIVE DATE: 12/31/02

RETRO DATE: 4/1/89 DEDUCTIBLE: 10,000.00

TYPE OF POLICY: Claims made

SPECIALTY: General Surgery

EXCLUSIONS: (Per Application, Underwriting & Endorsements)

PREMIUM: \$ 18,698.00 + 500.00 = 19,198.00 (membership fee)

Unimed looks forward to welcoming you as a member of our proud family of insured's, meanwhile anxiously awaiting receipt of the above-referenced items, we remain

Date 12/05/02

Sincerely Yours,

Brooke Harris

**EXHIBIT E**



The Physicians

Malpractice

Insurance: December 10, 2002

Source: Kitz Medical Services, Inc. (KIDZ)  
DBA Crit Care Newborn Serv.  
21644 State Rd. #7  
Boca Raton, FL 33428

ATT: Dee Crum

Ms. Crum,

Underwriting has tendered a quote from the Professional Liability Insurance Company, LTI (PLIC).

Corporate  
Kitz Medical Services, Inc. DBA Crit Care Newborn Serv.

Limits: 1m/3m Combined shared, includes designated employees: (to be listed)  
Retro: 07/01/89  
Deductible: \$25,000.00  
Premium: \$ 6,901.00

Individual Coverage

Limits: 1m/3m per physician (to be listed)  
Retro: As per schedule (to be listed)  
Deductible: \$25,000.00 per physician  
Premium: \$847,800.00

TOTAL \$853,961.00

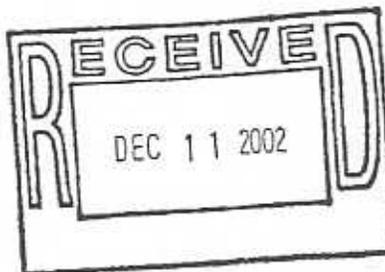
Payment Plan: 10 payments NO INTEREST.

Individual coverage will require applications to be completed by each physician with the corresponding claims history.

Sincerely,  
  
Max Reed

**EXHIBIT F**

Medical Risk Associates R.P.G. Inc  
Suite 378  
48 Par-la-ville Road  
Hamilton HM 11, Bermuda



Membership Director:

By and through the elective benefits of my international membership with Medical Risk Associates R.P.G., I hereby acknowledge my independent and direct procurement of alternative malpractice insurance coverage not otherwise available through other sources from Professional Liability Insurance Co., Ltd., a bonded and duty licensed insurance carrier chartered under British laws of the United Kingdom.

Date: \_\_\_\_\_ Applicant/Insured Signature: \_\_\_\_\_  
Nile R. Lestrangle, M.D. P.A.

Policy Period	Effective: <u>01-01-03</u>	Expires: <u>01-01-04</u>
	Retroactive Date: <u>07-01-86</u>	
Limits of Liability	Per Claim: <u>\$ 1,000,000.00</u>	Aggregate: <u>\$ 3,000,000.00</u>
Deductible	Per Claim: <u>\$ 10,000.00</u>	
Annual Premium:	<u>\$ 121,101.00</u>	
Membership Fee:	<u>\$ 500.00</u>	
Total:	<u>\$ 121,601.00</u>	

\*\*\*Initial payment of: \$ 12,610.10 due on or before effective date.

Additional Installment Schedule  
9 installments in the amount of \$ 12,110.10, due on the 1st  
day of each month thereafter until paid in full

# PROFESSIONAL LIABILITY INSURANCE COMPANY, LTD. CONFIDENTIAL MEDICAL PROFESSIONAL LIABILITY

## CERTIFICATE OF INSURANCE

THIS IS TO CERTIFY THAT A CLAIMS MADE PROFESSIONAL LIABILITY INSURANCE POLICY HAS BEEN ISSUED TO THE NAMED INSURED AS NOTED HEREON. THE INSURANCE PROVIDED IS SUBJECT TO ALL TERMS, EXCLUSIONS, AND OTHER CONDITIONS OF SUCH POLICY. THIS CERTIFICATE DOES NOT, AMEND, EXTEND OR OTHERWISE ALTER THE COVERAGE AFFORDED BY SUCH POLICY.

TO: Palmetto Hospital  
2001 West 88th Street  
Hialeah, FL 33016

NAMED INSURED: Maria A. Carballosa, MD

POLICY NO.:

ADDRESS: 3485 W. Flagler St.  
Ste. 100  
Miami, FL 33135

RETROACTIVE DATE: 7/1/02

SPECIALTY: Pediatrics  
No Surgery

CLASSIFICATION: 1

HMO/PPG  
APPROVED

POLICY PERIOD: 7/1/00 TO: 7/1/01  
12:01 AM Standard Time at the address of the Named Insured as stated herein.

Insurance is afforded with respect to the following coverage, subject to the limits of liability stated below and to all the terms of the policy.

COVERAGES	LIMITS OF LIABILITY	
	EACH CLAIM	ANNUAL AGGREGATE
Pediatrics No Surgery Deductible: \$ 5,000.00 per claim and/or claimants	\$ 250,000.00	\$ 750,000.00
ENDORSEMENTS: Retroactive Endorsement Specified Medical Endorsement Policy Change	CLAIMS ADMINISTERED BY: PLIC Claims Management, Inc. 6065 Roswell Rd., Suite 1188 Atlanta, Ga. 30328 (770) 955-7542	

THE NAMED INSURED:

- (a) is engaged in practice in the specialty indicated above and is duly registered and licensed to practice his / her profession under applicable laws;
- (b) engages in no professional specialty other than as stated above and performs only those procedures indicated on the application or included within the classification, stated above;

Professional Liability Insurance Company, Ltd., verifies that this policy is effective for the policy period shown, subject to the exclusions, conditions and other terms of the policy and subject to the terms of the Bylaws of Professional Liability Insurance Company, Ltd., a St. Vincent chartered entity. CANCELS: If the event insured's policy becomes invalid, prior to expiration, the carrier will endeavor to notify certificate holder by registered mail 30 days. However, failure of notification shall not impose any liability upon the carrier and/or agents.

6/8/00

ISSUE DATE

A Member Company of the CROWNE GLOBAL GROUP, LTD.

*Michael M. ...*  
AUTHORIZED REPRESENTATIVE  
10 QUEEN STREET • HAMILTON ONT L8N 4T1 • BERMUDA (441) 233-3121

# EXHIBIT H

Feb. 4. 2003 6:27PM  
SENT BY: AMERICAN GATE INC.:

305 252 0778;

FEB-4-02

No. 6484 P. 2/2  
PAGE 3/3

# PROFESSIONAL LIABILITY INSURANCE COMPANY, LTD.

ST. VINCENT & THE GRENADINES, WEST INDIES



## MEDICAL PROFESSIONAL LIABILITY CLAIMS-MADE COVERAGE

CONFIRMATION NO.  
PL 02-120629-9

**Insured:** Adolfo Blanco, MD  
**Address:** 11255 SW 211 Street  
Miami, FL 33187

### CONFIRMATION OF INSURANCE

**EFFECTIVE:** 12/01/02  
**EXPIRES:** 12/01/03  
**RETROACTIVE DATE:** 12/01/02  
**POLICY PERIOD:** ANNUAL  
CONFIRMATION

**PRODUCER:** Medical Risk Associates, FPG, Inc.  
Suite 378  
48 Par-la-Vie Road  
Hamilton HM 11, Bermuda

**PROFESSION / BUSINESS:**  
General Practice No Surgery

- ENTITY ONLY
- ENTITY AND SCHEDULED MEDICAL PROFESSIONALS
- OTHER

<b>PER CLAIM</b> \$250,000	<b>AGGREGATE</b> \$750,000
<b>PER CLAIM AND/OR CLAIMANTS</b> \$2,000	

#### SPECIAL CONDITIONS:

**CONDITIONS:**  
The insuring confirms the insurance stipulated above. This insurance is subject to the terms, conditions, and limitations of the policy in current use by the insurer.

This is a Confirmation for claims-made insurance. It applies only to claims made and reported to the insurer during the Policy Period and resulting from Claims occurring after Retroactive Date.

Claims Expenses are included in the limits of Liability and Deductible unless otherwise specified.

This confirmation may be cancelled by the insured by surrender of this Confirmation or by written notice to the insurer stating when cancellation will be effective. This Confirmation may be canceled by the insurer by notice to the insured. This Confirmation is cancelled when replaced by a policy. If this Confirmation is not replaced by a policy, the insurer is entitled to charge a premium for the Confirmation according to the rules and rates in use by the insurer. It is agreed and understood that coverage has been secured on a direct procurement basis by policy holder.

**ADDITIONAL INSURERS:** THIS CONFIRMATION IS NOT VALID FOR HOSPITALS OR NURSES

**DATE:** 1/20/02  
**BY:** [Signature]  
AUTHORIZED REPRESENTATIVE

A Member Company of CIGNA GLOBAL GROUP, LTD



R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.

6. A copy of the organizational chart depicting the functions and relationships of all persons, corporations, and other entities, including all indemnitors, reinsurers, stop-loss carriers, and all other functionally and organizationally related entities involved in the solicitation, marketing, sales, underwriting, and claims aspects of all insurance products issued by or through UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC

All underwriting guidelines that are and have in the past been used by UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC., for all Florida business.

All claims manuals that are and have been utilized by UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC., for the investigation and adjudication of claims arising under contracts, policies, or certificates of coverage issued to persons and entities in Florida.

7. All written solicitation, advertising, and marketing material utilized in Florida by UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.

8. All applications for and policies of primary insurance, reinsurance, and stop-loss coverage submitted by or on behalf of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC. Included within the scope of this request are any pending applications for primary insurance, reinsurance, and stop-loss coverage, and any written denials or rescissions of such coverage.

9. A copy of each insurance license held by each officer, director, manager, member, general partner, limited partner, and salesperson of and for UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.

10. A copy of each contract, letter, or memorandum of agreement between UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK

ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC and each Florida attorney or law firm, concerning the provision of legal representation to insureds of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC., in the event of a lawsuit against such insured for a covered cause of loss.

11. Computer runs or similar documentation evidencing all claim payments under contracts, policies, or certificates issued to Floridians or under which Floridians are or were afforded coverage, since the inception of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.'s, operation in Florida. If necessary to understand or to clarify such documentation, please also provide a key to any coding systems employed.

12. Computer runs or similar documentation evidencing all claims, incurred but not paid, under contracts, policies, or certificates issued to Floridians or under which Floridians are or were afforded coverage, since the inception of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.'s, operation in Florida. If necessary to understand or to clarify such documentation, please also provide a key to any coding systems employed.

13. Documentation evidencing claim denials under contracts, policies, or certificates issued to Floridians or under which Floridians are or were afforded coverage, since the inception of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.'s, operation in Florida. If necessary to understand or to clarify such documentation, please also provide a key to any coding systems employed.

14.. A copy of each contract with, and Florida insurance license of, each adjuster, or other person or entity involved in the investigation or adjustment of Florida claims since the inception of UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.'s operation in Florida.

15. A complete listing of the names and business and residence addresses of all persons who are presently authorized to submit potential business to UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC.

16. All documentation or other data compilations evidencing the gross premium collected by UNIMED, PROFESSIONAL LIABILITY INSURANCE COMPANY, Ltd., PLIC CLAIMS MANAGEMENT, INC., MEDICAL RISK ASSOCIATES, R.P.G., INC., MEDICAL RISK ASSOCIATES, R.P.G., Ltd., and PHYSICIANS MALPRACTICE ANALYSTS, INC., from Florida business.



**EXHIBIT B**



AFFIDAVIT OF SIMONE A. SABGA

- 1) Simone A Sabga.
- 2) I am employed with Consolidated Medical Management, Inc. (CMM) in the Accounting Department. CMM provides medical billing, accounting and practice management services for NeuroCare Associates (NCA), the offices of Martin Lesser MD, and Abraham Chamely, MD.
- 3) This affidavit is for Dr. Abraham Chamely and Dr. Mohammed Ismail. There are three (3) locations for this practice. The addresses are as follows:

9345 West Sample Road  
Coral Springs, FL 33065

4900 West Oakland Park Blvd  
Suite 309  
Lauderdale Lakes, FL 33313

7800 North University Drive  
Suite 101  
Tamarac, FL 33321

- 4) NeuroCare Associates is a medical practice specializing in neurology.
- 5) NCA selected medical malpractice insurance with PLIC.
- 6) NCA found out about PLIC from their office manager Rosemarie Rosas.
- 7) NCA joined PLIC on December 31, 2002.
- 8) The effective date of the policy is December 31, 2002. Retroactive to July 1, 1996 for Dr. Ismail and February 14, 1991 for Dr. Chamely.
- 9) The policy expires on December 31, 2003.
- 10) The monthly payment is \$3,911.12 per physician
- 11) The mailing address of PLIC is as follows:

6025 Sandy Spring Circle  
Suite #312  
Atlanta, GA 30328

- 12) Yes, payments were made to PLIC after March 25, 2003.
- 13) Two (2) payment were made to PLIC after March 25, 2003 The details are as follows:

Date:	March 31, 2003
Check Number:	5985
Amount:	\$7,822.24
Payment for:	Malpractice insurance for April 2003 for Drs. Chamely and Ismail's policy.

Date:	April 30, 2003
Check Number:	6021
Amount:	\$7,822.24
Payment for:	Malpractice insurance for May 2003 for Drs. Chamely and Ismail's policy.

- 14) There were no payments returned, not cashed, to the practice after March 25, 2003 by PLIC.
- 15) PLIC cashed check number 6021 in the amount of \$7,822.24 after March 25, 2003.
- 16) Copies of the cashed checks are enclosed.
- 17) NCA's Office Manager Rosemarie Rosas contacted PLIC after March 25, 2003. At that time, she was advised that everything was fine and the insurance was valid.

STATE OF FLORIDA  
 COUNTY OF BROWARD

Under penalties of perjury, I declare that I have read the forgoing document and that the facts stated in it are true.

FURTHER THE AFFIANT SAYETH NAUGHT.

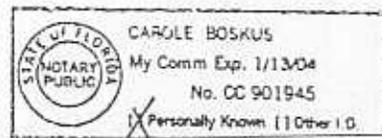
*Simone A. Sabga*  
 \_\_\_\_\_  
 Simone A. Sabga

Sworn to (or affirmed) and subscribed before me this 13 day of June 2003, by Simone A. Sabga.

Personally Known  OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

*Carole Boskus*  
 \_\_\_\_\_  
 Signature of Notary Public State of Florida



NOTARY PUBLIC  
 Print, type or stamp Commissioned  
 Name of Notary Public

My Commission expires: 1/13/04



WACHOVIA

Account	Amount	Date	Check Number
---------	--------	------	--------------

WACHOVIA BANK, N.A.

5892

**NeuroCare**  
 9305 West Sample Road  
 Coral Springs, FL 33065

63-1356/670

CHECK NO.

DATE

AMOUNT

5892

Jan 30, 2003

\*\*\*\*\*57,822.24

Memo:

PAY TO THE ORDER OF:

Seven Thou: and Eight Hundred Twenty-Two and 24/100 Dollars

Professional Liability Insurance Compan  
 6025 Sandy Spring Circle  
 #312  
 Atlanta, GA 30328

*Small & Change*

*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE

Security features. Details on back.

ENDORSEMENTS GUARANTEED

BERMUDA COMMERCIAL BANK LIMITED  
 BERMUDA

BERMUDA COMMERCIAL BANK, BANKER OR TRUST COMPANY

PLACED TO THE CREDIT OF PAYEE'S ACCOUNT WITH US  
 FOR BERMUDA COMMERCIAL BANK LIMITED  
 HAMILTON, B.L.I./M/DA



WACHOVIA

Account Amount Date Check Number

WACHOVIA BANK, N.A.

5927

NeuroCare  
9305 West Sample Road  
Coral Springs, FL 33065

63-1356/670

CHECK NO.

DATE

AMOUNT

5927

Feb 28, 2003

\*\*\*\*\*\$7,822.24

Me-mo:

PAY TO THE ORDER OF:

Seven Thou and Eight Hundred Twenty-Two and 24/100 Dollars

Professional Liability Insurance Compan  
6025 Sandy Spring Circle  
#312  
Atlanta, GA 30328

*[Handwritten Signature]*  
AUTHORIZED SIGNATURE

ED Security Features Details on back

OR ENDORSEMENTS GUARANTEED  
03-14-03

BANK OF AMERICA  
PAY TO THE ORDER OF ANY  
BANK, BANKER OR TRUST COMPANY  
BERMUDA COMMERCIAL  
BANK LIMITED  
BERMUDA

SP. SPECIAL CHECK  
06-27-03

NO SIGNATURE STAMP ON FRONT WILL BE ON THIS LINE

1 ABOVE LINE



WACHOVIA

Account Amount Date Check Number

WACHOVIA BANK, N.A.

6021

NeuroCare  
9305 West Sample Road  
Coral Springs, FL 33065

63-1356/670

Security Features Details on back.

CHECK NO.

DATE

AMOUNT

Memo: PL02-1:0708-9 / PL02-120709-9

6021

Apr 30, 2003

\*\*\*\*\*\$7,822.24

PAY TO THE ORDER OF:

Seven Thousand Eight Hundred Twenty-Two and 24/100 Dollars

Professional Liability Insurance Compan  
6025 Sand Spring Circle  
#312  
Atlanta, Ga. 30328

*[Handwritten Signature]*  
AUTHORIZED SIGNATURE

05-16-03

05/15/03  
JPM CHASE 800-523-9476  
400 CMC BLDG, NY 10245

PAY TO THE ORDER OF ANY  
BANK, BANKER OR TRUST COMPANY  
BERMUDA COMMERCIAL  
BANK LIMITED  
BERMUDA  
PRIOR ENDORSEMENTS GUARANTEED

**FIRST UNION**

**WACHOVIA**

Account:	Amount	Date	Check Number
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WACHOVIA BANK, N.A.

5842

**NeuroCare**  
 305 West Sample Road  
 Coral Springs, FL 33065

63-1356/670

CHECK NO.  
5842

DATE  
Dec 31, 2002

AMOUNT  
\*\*\*\*\*\$8,822.32

Memo:

PAY TO THE ORDER OF:

Eight Thousand Eight Hundred Twenty-Two and 32/100 Dollars  
 Professional Liability Insuran

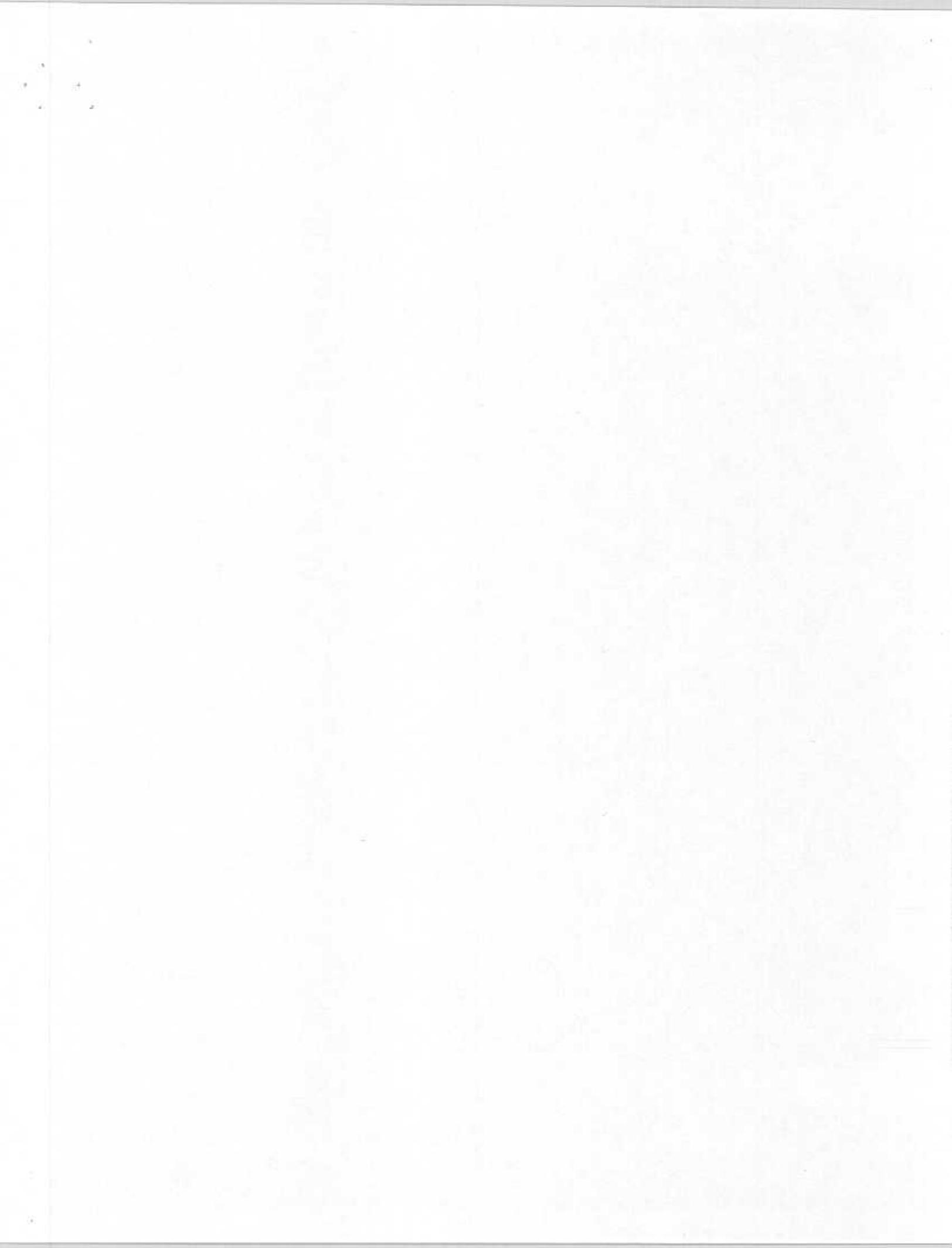
*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE

Security Features Details on back.

PAY TO THE ORDER OF BANK OF AMERICA NA  
 BANK, BANKER OR TRUST COMPANY NA  
 BERMUDA COMMERCIAL BANK LIMITED  
 BERMUDA  
 PRIOR ENDORSEMENTS GUARANTEED

01-22-03

ENDORSE HERE



**EXHIBIT C**

**FIRST UNION**

**WACHOVIA**

Account	Amount	Date	Check Number
---------	--------	------	--------------

WACHOVIA BANK, N.A.

5985

**NeuroCare**  
 9305 West Sample Road  
 Coral Springs, FL 33065

63-1356/570

CHECK NO.

DATE

AMOUNT

5985

Mar 31, 2003

\*\*\*\*\*\$7,822.24

PAY TO THE ORDER OF.

Memo: Chamely / Ismail

Seven Thousand Eight Hundred Twenty-Two and 24/100 Dollars

Professional Liability Insurance Compan  
 6025 Sandy Spring Circle  
 #312  
 Atlanta, C A 30328

*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE

Security is above. Details on back

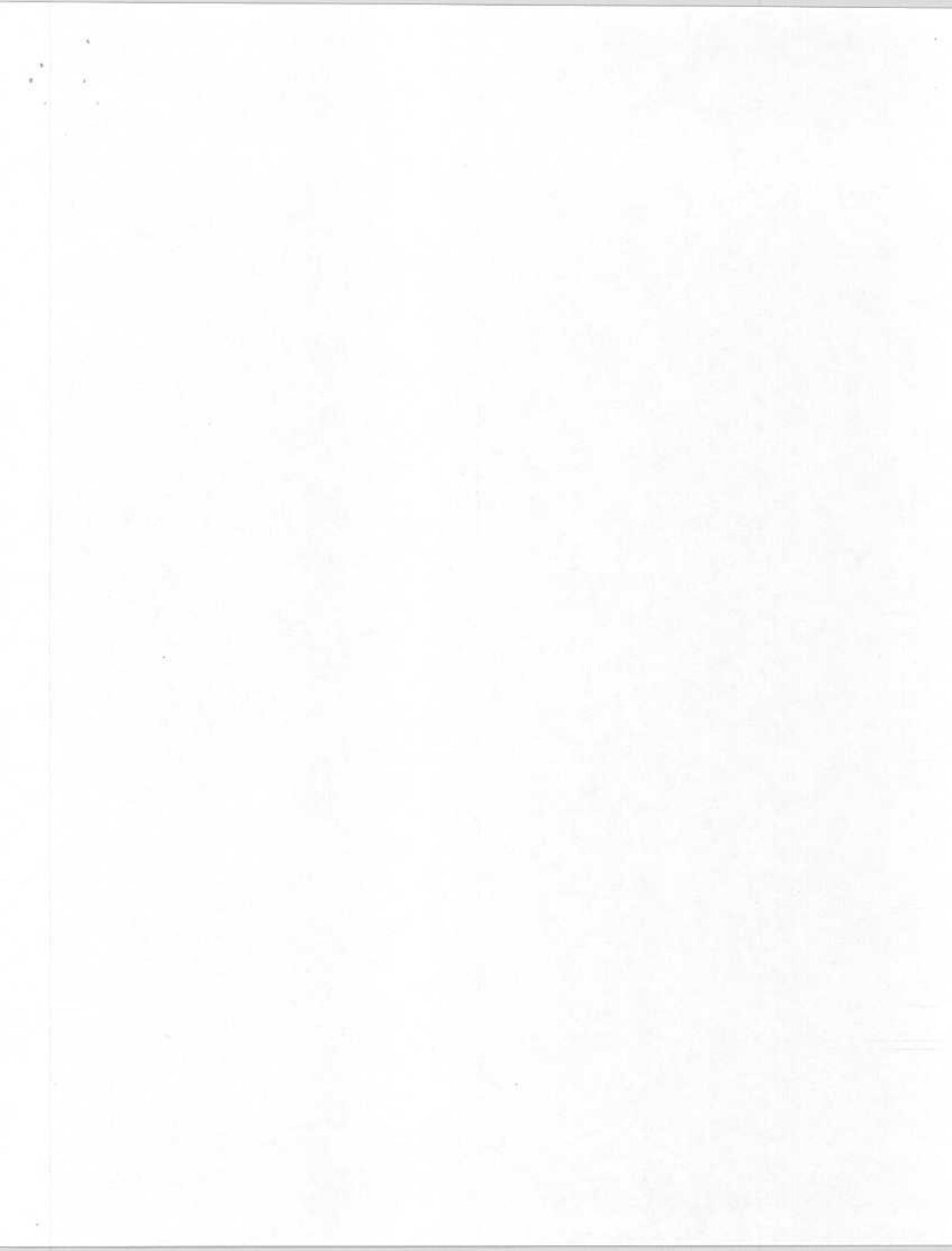
FD

1492 034 663102 52  
 41421 22 12119  
 PRIOR ENDORSEMENTS GUARANTEED

FOR BERMUDA COMMERCIAL BANK LIMITED  
 HAMILTON, BERMUDA  
 PLACED TO THE CREDIT OF PAYEE'S ACCOUNT WITH US  
 BANK, BANKER OR TRUST COMPANY  
 ORDER OF ANY  
 5211 21 11 1124  
 6011 70  
 524-523-945  
 544-448-3440 BKT

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE

ENDORSE HERE



**EXHIBIT D**



WACHOVIA

Account Amount Date Check Number

WACHOVIA BANK, N.A.

6021

NeuroCare  
9305 West Sample Road  
Coral Springs, FL 33065

63-1356/670

CHECK NO.

DATE

AMOUNT

Memo: PL02-110708-9 / PL02-120709-9

6021

Apr 30, 2003

\*\*\*\*\*\$7,822.24

PAY TO THE ORDER OF:

Seven Thousand Eight Hundred Twenty-Two and 24/100 Dollars

Professional Liability Insurance Compan  
6025 Sand Spring Circle  
#312  
Atlanta, Ga. 30328

  
AUTHORIZED SIGNATURE

Secure features. Details on back.

05-16-03

05/15/03  
JPM CHASE 800-523-3476  
4 CHC BAYLN, NY 11245

PRIOR ENDORSEMENTS GUARANTEED

PAY TO THE ORDER OF ANY  
BANK, BANKER OR TRUST COMPANY  
BERMUDA COMMERCIAL  
BANK LIMITED  
BERMUDA



**EXHIBIT E**

# RADEY | THOMAS | YON

Attorneys & Counselors at Law

POST OFFICE BOX 10967 (32302)  
101 NORTH MONROE STREET, SUITE 775  
TALLAHASSEE, FLORIDA 32301  
www.radeylaw.com

850-425-6654 phone  
850-425-6694 fax

E-mail: [karen@radeylaw.com](mailto:karen@radeylaw.com)

May 29, 2003

KAREN ASHER-COHEN  
DONNA E. BLANTON  
BERT L. COMBS  
JEFFREY L. FREHN  
CHRISTOPHER B. LUNNY  
ELIZABETH MCARTHUR  
TRAVIS L. MILLER  
JOHN RADEY  
HARRY O. THOMAS  
DAVID A. YON

## VIA HAND DELIVERY

Susan Dawson  
Senior Attorney  
Division of Legal Services  
Department of Financial Services  
Larson Building, 200 East Gaines Street  
Tallahassee, FL 32399-0333

RE: Immediate Final Order, Case No. 66336-030-CO

Dear Ms. Dawson:

Thank you for your letter of May 27, 2003. In your letter you request that the notices contain the following language: "The IFO orders PLIC and other related entities and individuals to immediately cease transacting medical malpractice insurance in the state of Florida, including the collecting of premiums, renewing policies and selling new policies." As UNIMED and PLIC ("the Company") has previously advised your Office, it is no longer accepting applications for new policies and has agreed to not renew existing policies from residents of the State of Florida, subject to the statutory 60-day notice. However, the Company does believe the policies were written in compliance with applicable law and therefore intends to pay claims and honor the contractual agreements it entered into with its insureds. While the Company is not accepting any premium for new or renewal contracts, there are contracts outstanding for which policyholders are making periodic payments. Accordingly, the Company is entitled to collect the balance due in exchange for honoring the terms of the contract including the claims. After this process is concluded, no additional money will be collected.

Susan Dawson  
May 29, 2003  
Page 2 of 2

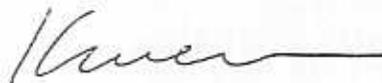
RADEY | THOMAS | YON

Attorneys & Counselors at Law

Further, some of the Company's policyholders have advised the Company that they do not want their names published. The Company therefore desires to honor these requests and would prefer not to violate the privacy rights of Florida citizens by referring people to the Department's website. However, they will be happy to send a copy of the IFO to any policyholder that requests it. Again, the Company is not writing any new or renewal policies for Florida residents as directed by the IFO, and therefore this reference seems unnecessary.

I hope we can bring this matter to a speedy resolution. We are ready to send the notices attached to our April 29 letter as soon as you advise to do so.

Sincerely,



Karen Asher-Cohen

KAC:kde

cc: Julianna Burke