FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Socretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # F9400004771 (1)

HEALTH MANAGEMENT NETWORK, INC.

Mailing Address

FILED Secretary of State 1996-02-13

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Section Sect	12081 ASHF DAVIE FL 33 US		12081 ASHFORD LAP DAVIE FL 33325 US	NE		Date Incorporated or Qualified 09/15/1994	3a. Date of Las 07/18/		
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Country Coun	Suite, Apt. #, etc. Suite, A 22			Oty & State		5. Certificate of Status Desired		75 Additional	
25 29 30 Floods Soften Free No Name and Address of Currant Registered Agent 10, Name and Address of New Registered Agent 31 Name 32 Street Address (P.O. Box Number is Not Acceptable) 32 Street Address (P.O. Box Number is Not Acceptable) 33 Name 34 Oxy						, ,			
CARLOW, MICAHEL 12081 ASHFORD LANE DAVIE FL 33325 80	Ζφ 24	25	29 30						
CARLOW, MICAHEL 12001 ASHFORD LANE DAVIE FL 33325		9. Name and Address of Cu	rent Registered Agent			10. Name and Address of New Re	egistered Agent		
12081 ASHFORD LANE DAVIE FL 33325 84 City	CADI O	A ANCAUCI		8.	Name				
11. Pursuant to the provisions of Sections 627.0562 and 5u3-1568. Horids Statutes, the above named corporation submist this statement for the purpose of changing its registered distribution of both in the State of Finded Statute Statutes, the above named corporations submist this statement for the purpose of changing its registered agent 1 and family making and accept the displacement as negligible agent 1 and statutes. 12	12081 /	ASHFORD LANE				ess (P.O. Box Number is Not Acceptable	e)		
1. Pursuent to this provisions of Sections 607,0502 and 507,1508 Flexicle Statistics, this above named corporation is this systematic for the purpose of change was authorized by the comporation's board of directors. I hereby accept the appointment are registered agent it am in the way, and accept the objections of, Socion 607,0605, Ronda Statistics by the comporation's board of directors. I hereby accept the appointment are registered agent it am in the way, and accept the objections of, Socion 607,0605, Ronda Statistics by the comporation's board of directors. I hereby accept the appointment are registered agent it am in the way, and accept the objections of, Socion 607,0605, Ronda Statistics by the comporation's board of directors. I hereby accept the appointment are registered agent it am in the way, and accept the objections of, Socion 607,0605, Ronda Statistics by the comporation's board of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of the registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the appointment are registered of directors. I hereby accept the ap	UMVIC P	-L 33323		В.	'				
11. Pressure to the provisions of Sections 607,0002 and 507,1509. Tends Statistics, the abuse reproductor softward agent, or hold in the State of Plands Servi change was authorized by the comporation's board of directors. I hereby accept the appointment as registered agent. I am statistic in the State of Plands Service changes agent and accept the obligations of, Section 507,000, Florida Statutes. SCINATURE				84	City		85	Zip Code	
SCRNATURE	or register	ed agent, or both in the State of F	ionga. Such change was author.	zea by the car	L named corpor poration's boar	ration submits this statement for the purp rd of directors. I hereby accept the appo	occ of changing i	ts registered office red agent. I am	
12	Tarrior as Well	th, and accept the obligations of, S	lection 607.0505, Florida Statute	15.			Ü	Ŭ	
12	SIGNATURE .	Signature typed or printer harry procession is:	gerhandstradium op op	Ols Buyandi An	1 (Sola afaré résultée	(white existing)	DATE		
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14. I do hereby certify that the information supplied with this fling is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	001 - S1 7#			64 CITY -	ST - Z:P				

4. To nevery certify that the information supplied with this thing is voluntarily turnished and does not quality for the exemption stated in Section 119.07(5)(k). Florada Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that i am an officially or director of the comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florada Statutes; and that my name appears in Block 12 or Block 12 for sunged, or on an attachment with an address.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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