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FILED  
Mar 18 1997 8:00am  
Secretary of State

PROFIT.  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT #  
1. Corporation Name

Applied for 996-19152

Fox Eyes Managed Care, Inc



Principal Place of Business Mailing Address  
285 W. 74th Place 285 W 74th Place  
Hialeah, FL 33014 Hialeah, FL 33014

3. Date Incorporated or Qualified 03/01/96 3a. Date of Last Report Initial Report  
4. FEI Number 65-0706188 Applied For Not Applicable  
5. Certificate of Status Desired [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution [ ] \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes [x] Yes [ ] No

2. Principal Place of Business 2a. Mailing Address  
11 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
12 City & State 27 City & State  
13 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS  
TITLE P [ ] DELETE  
NAME Wolman, Philip  
STREET ADDRESS 285 W. 74th Place  
CITY-ST-ZIP Hialeah FL 33014  
TITLE V/P [ ] DELETE  
NAME Messa, Robert  
STREET ADDRESS 285 W. 74th Place  
CITY-ST-ZIP Hialeah, FL 33014  
TITLE V/P [ ] DELETE  
NAME Martin, Jeffrey  
STREET ADDRESS 285 W. 74th Place  
CITY-ST-ZIP Hialeah, FL 33014  
[ ] DELETE  
[ ] DELETE  
[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  
1.1 TITLE [ ] Change [ ] Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE [ ] Change [ ] Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE [ ] Change [ ] Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE [ ] Change [ ] Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE [ ] Change [ ] Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE [ ] Change [ ] Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

700002117557  
-03/19/97--01015--010  
\*\*\*165.00

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I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) Florida 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. 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: [Signature] Philip Wolman 3/10/97

CR2E034 (9/96)