FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000102706 (4) QUALITY ONCOLOGY, INC. Principal Place of Business Mailing Address 1200 SOUTH PINE ISLAND ROAD 1200 SOUTH PINE ISLAND ROAD SUITE 170 SUITE 170 PLANTATION FL 33324 PLANTATION FL 33324-4469 3. Date Incorporated or Qualified 3a. Date of Last Report 12/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 200 East Las das Blud. 26 200 East Las Olas Blud Not Applicable \$8.75 Additional Suite Apt # etc 5. Certificate of Status Desired Suite 2100 Fee Required Suite 2100 Election Campaign Financing \$5.00 May Be 23 Fort Lauderdale FL Added to Fees Trust Fund Contribution 8. This corporation has liability for Intangible tax under s. 199.032, 33301 U.5. Yes No 25 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name KTG&S REGISTERED AGENT CORPORATION 100 S.E. 2ND STREET Street Address (P.O. Box Number is Not Acceptable) 28TH FLOOR 83 **MIAMI FL 33131 B4** City 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. Sugar sectification printed transfor registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Director Change 11 TITLE THE Chairman, President, CEO James 6 Schwade, M.D. 1390 South Divie Highway, suite 1804 Albert B. Einstein, BBM NAME 12 NAME 12902 magnolik Drive STREET AUDRESS 1.3 STREET ADDRESS Coral Gables, FL 33146 Tampa, FL 33612 1.4 CITY-ST-ZIP CITY - \$1 - ZIP DELETE Executive vice Artibent Change Addition THUE 2.1 TITLE Terry S. Bison, m.D. 308 N. Clyde morris Blvd., P.O. Box 1089 2.2 NAME Tom Bayless NAMÉ 1000 East has olds Blyd., Suite 2000 2.3 STREET ADDRESS STREET ADDRESS Daytona Beach, FL 32115-1089 CHTY-ST-ZIP 2. 4 CITY-ST-ZIP Pt. Lauderdele Fl 38301 Director DELETE Change Addition 101.F 3 1 TITLE warren Ross, M.D. MAME 3.2 NAME UF Shands Concer Center, P.O. 180x 100385 STREET ADDRESS 3.3 STREET ADDRESS Goinesville, FL 32610 - 6385 CHY-SI-ZIE 3.4. CITY-ST-ZIP DELETE Change Addition TiTLE 4.1 TITLE Phillip C. Smith, m. D. 4 2 NAME NAME 1599 NW 9 Avenue, suite 201 STREET ADDRESS 4.3 STREET ADDRESS Boca Raton, FL 33486 4.4 CITY-ST-ZIP CHY-ST-ZIE DELETE 5.1 TITLE Change Addition Tiffe Director NAME Bruce D. Green, m.D. 5.2 NAME 4815 5. Seacrest Bivo. STREET ADDRESS **53 STREET ADDRESS** Boynton Beach, FL 33435

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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; that fam 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 annears in Block 12 or Block 13 if changed, or

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

michael Koznitsky, Esquire.

Sther Adores One International Place, Suite 2800

Dilini-Sti-7iP

1011,6

☐ Change ☐ Addition

FILED

Apr 30 1997 8:00am

Secretary of State