CORI ANNU	FILE NOW: FILING FEE AFT PROFIT CORPORATION ANNUAL REPORT 1996			ER MAY 1 IS \$225.00  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			Man				
DOCUN 1. Corporation	<b>MENT</b> #	V35972	(1)								
HOSP	PICE, INC.										<b>?</b> [£])
Principal Place	of Business	M	ailing Address	·				-			
ATTN: LEGAL DEPARTMENT ATTN: LEGAL DEPARTME 100 S. BISCAYNE BLVD., SUITE 1500 100 S. BISCAYNE BLVD., MIAMI FL 33131 MIAMI FL 33131					ent . Suite 1500			Date Incorporated or Qualific	d 3a	Date of Lest	Report
· An and a train								05/14/1992	. Ju	03/02/	•
- 2. Principal Pla 21	ce of Business	2a. 26	Mailing Address					4. FEI Number 65-0160635			Applied For
Suite, Apt #	, etc.	27	Suite, Apt. #, etc.	-				5. Certificate of Status Desired			Not Applicable  5 Additional Required
City & State		28	City & State					6. Election Campaign Financing Trust Fund Contribution			00 May Be
Ζ(p)	Coun	ltry	Ζφ	Cou	intry			8. This corporation has liability		le tax under	led to Fees s 199.032,
<b>Z</b> 4	25 9. Name and Add	29 ress of Current Regis	tered Agent	30	r			Florida Statutes  10. Name and Address of New	res ∐ N		
					81	Name		TO. Harrie and Address of Ma	A Definite	ed Agent	
CORPO	RATION SERVICE	COMPANY			82	Ctroot	Addros	ss (P.O. Box Number is Not Accep	N. H. I. I.		
1201 H	AYS STREET				Ì	Street	Addres	es (P.O. BOX NUMBER IS NOT Accep	(able)		
TALLAH	IASSEE FL 32301				83						
				ì	64	City				85	Zip Code
11. Pursuant to	the provisions of Sec	tions 607,0502 and 60	7.1508. Florida Statute	as the abo	Vern	amed co	rnorat	ion submits this statement for the			
		ne State of Florida, Such gations of, Section 607.			corpo	oration's	board	of directors. I hereby accept the a	ppointmen	t as registere	d agent. I am
SIGNATURE											
- 12.		e of registered agent and title it a OFFICERS AND DIREC		Ti : Registered	Ageint	signature n	e-p-ireo w	ADDITIONS/CHANGES TO C	DAT		OCIC IN 10
Thf	DCEO		DELETE	1.170	TLE			ADDITIONS/OFFANGES TO C	rricens /	Change	· <u></u>
NAM:	Westbrook,			1 2 NA	ME					•	
STREET ADDRESS		ne blvd., suite 15	500	13 ST	REET,	ADDRESS					
City - St - Zif	MIAMI FL			1401		- 716					
TIT; F NAME	DECO Collier, Eari	LAFID	<b>KK</b> DETELE	2 1 TI			E			☐ Change	★ Addition
STREET ADDRESS		ne blvd., suite 15	inn	22 NA		oppres.	N]	EVIN, RICHARD I	., J	R	
0/1Y - S1 - ZIP	MIAMI FL	,		2401		ADDRESS	10	00 S BISCAYNE F	LVD.	, SUIT	CE1500
TOLE	D	·	DELETE	3 176		<u> </u>	_М.	IAMI, FL 33131		☐ Change	Addition
NAME	COLLIFLOWER			3 2 NA	ME					_ ,	<b>_</b>
STREET ADDRESS		ne BLVD. Ste 1500		33 \$1	REET	ADDRESS					
COLV-S1-ZOP	MIAMI FL D		☐ DELETE	3.4 CIT		- ZIP					
NeMi	Williams, J. R	<b>)</b>	[] DELETE	4 1 Tr						Change	Addition
STREET ADDRESS		, Ne BLVD., ste 1500	1	4 2 NA		DDRESS					
C-11 - S1 - Z12	MIAMI FL	, 1000	-	4.3 ST							
THE	VTAS		DEFETE	5 1 TH		=".				☐ Change	Addition
NAME	OHLENDORF, I			5 2 NA	ΜE					_ •	_
STREET ADORESS		ne blvd., ste 1500	)	5 3 STF	REETA	DDRESS					
City St 26	MIAMI FL			5.4 CIT	Y-S1	. 71P					

14. LGh hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 logal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6 1 THILE

62 NAME

6.3 STREET ADDRESS

AS

**SIGNATURE:** 

STERLING, MARK A

MIAM! FL

100 S BISCAYNE BLVD., STE 1500

21 22

23 24

TITLE

NAMi

STEEF! ADDRESS:

CITE \$1-719



□ DELETE

(305) 350-6044 Daytime Phone #

100 S Biscayne Blvd., Suite 1500

CHRISTMANN, KATHRYN A.

Change

XAddition