FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

DOCUMENT # 505398 (8)

1. Corporation Name
AIM MEDICAL MANAGEMENT, INC.

Principal Place of Business
~~3911 NOVA ROAD~~
~~PORT ORANGE FL 32127~~

Mailing Address
~~3911 NOVA ROAD~~
~~PORT ORANGE FL 32127~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/01/1976
3a. Date of Last Report: 02/04/1994

2. Principal Place of Business
21 303 N. Clyde Morris Blvd
Suite Apt # or Bldg
22 Attn: General Counsel
City & State
23 Daytona Beach, FL
24 32114 25 USA

2a. Mailing Address
26 303 N. Clyde Morris Blvd
Suite Apt # or Bldg
27 Attn: General Counsel
City & State
28 Daytona Beach, FL
29 32114 30 USA

4. FEI Number: 59-1674968 — 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 subject to intangible tax under Section 607.0505 Florida Statutes [X] Yes [ ] No

9. Name and Address of Current Registered Agent
BOYE, R. H.
3911 NOVA ROAD
PORT ORANGE FL 32127

10. Name and Address of New Registered Agent
81 Name: DAVIDSON, DAVID J., ESQ.
82 Street Address (P.O. Box Number is Not Acceptable): 303 N. CLYDE MORRIS BLVD.
83
84 City: DAYTONA BEACH FL 85 Zip Code: 32114

11. Pursuant to the provisions of Sections 607.0505 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, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: David J. Davidson 4/6/95

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City	State	Zip
VD	~~JENNINGS, LANE E~~	~~6206 SHORELINE DR.~~	~~PORT ORANGE, FL 00000~~		
PD	~~BOYE, RICHARD H~~	~~117 ANCHOR DR.~~	~~PONCE INLET, FL 00000~~		
TD	~~LUCAS, KENNETH J~~	~~1533 OAK FOREST DRIVE~~	~~ORMOND BCH, FL 00000~~		
SD	~~MARRESE, ROXY, JR~~	~~6 MOSS POINT DR~~	~~ORMOND BCH, FL 00000~~		

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS (NOTE)

Title	Name	Street Address	City	State	Zip
PD	HAUGHWOUT, RICHARD	6247 PALOMINO CIRCLE	PORT ORANGE, FL 32119		
ST	SCVACOOL, RICHARD B	1967 MENGER CIRCLE	SOUTH DAYTONA, FL 32119		
V/D	GRIFFIN, WILLIAM J	6193 SHORELINE DR	PORT ORANGE, FL 32127		
C	ANDERS, MICHAEL H	1414 WEST GRANADA BLVD	ORMOND BEACH, FL 32174		

14. I do 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)(b), Florida Statutes. I further certify that the information indicated on the 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 officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changes or an attachment with an address.

SIGNATURE: Richard B. Haughwout
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Haughwout, President
04/12/95 (904)254-4050

0012009 CP