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

PROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

DOCUMENT #

594033

(3)

| CUR INC Principal Place | j. | iews for pos | ST ANESTHES Mailing Ad | | NURSE | S, | | | | | | | | |
|--|--|--|--|--|--|---|--|---------------------------------------|--|----------------------------|--------------------|--|-------------------------------------|---|
| SUITE 106 7480 FAIR MIAMI FL | RWAY DR | | SUITE 7480 F | SUITE 106 7480 FAIRWAY DR MIAMI FL 33014 | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | ***** | IL DOOLT | | | | | | rporated or Qu | ualified | 3a. Date | | • |
| 2. Principal P | lace of Business | s | 2a. Mailing | Address | | | | | | 1/1978 | | <u> </u> | 03/07/ | |
| 21 | | | 26 | Mudicas | | | | | 4. FEI Numb | er -1872598 | | | L | Applied For |
| Suite, Apt. | #, etc. | | · - · · · · | Apt. #, etc. | | | | | | | | | 40.7 | Not Applicat |
| 22 | | | 27 | | <u></u> - | | | | 5. Certificate | of Status Des | ired | | | 5 Additional Required |
| City & State | 2 | | Orty & S | State | | | | | | ampaign Finar | ncing | | \$5. | 00 May Be |
| Z ₁ D | | Country | Zip | | Cou | ıntry | | ·· - | | d Contribution | ille for i | | | ed to Fees |
| 24 | 25 | | 29 | | 30 | , | | | Florida Sta | oration has liab atutes | ≫ilty torin Yes | | ix under | s 199.032, |
| | 9. Name ar | nd Address of Curre | ant Registered Ag | gent | - | | | · · · · · · · · · · · · · · · · · · · | 10. Name an | | | | Agent | |
| *1044 | | | | | | 81 | Nan | ie | ···· | | | | - | |
| | I, FRANK | 01.07C 400 | | | | 82 | Stre | et Addres | s (P.O. Box Nu | mber is Not Ac | ceptabl | e) | | |
| 1 UOP 1 MAIMI | Fairway dr. Fl 33014 | ., SUIIE 106 | | | | | | | | | | ·- · - · · · · · · · · · · · · · · · · | | |
| Mami | PL 33014 | | | | | 83 | | | | | _ | | | |
| | | | | | ł | 84 | City | | ······································ | | | | 85 7 | Zip Code |
| 11. Pursuant t | the provisions | s of Sections 607.050 oth, in the State of Flor | 12 and 607.1508, F | Florida Statute | ne the abo | ⊸e.na | med | -~rvvali | a shoulte this | | - 180 | <u> FL</u> | | · |
| | ediagent or bot | Ale in the Oak to the | | O1.00 | 20 no | VE | Olina. | CONTRACTOR | Юก รับบากเธากร | Statement ion | the purp | cose of cha | nging its realstere | registered offi d agent. I am |
| or register. familiar wit | h. and accept t | nui, in the State of Flor he obligations of, Sec | nda, Such change Hon 607 0505, Flo | was authoriza | ed by the c | orpo | ration | s board | of directors. I he | ereby accept th | ne appo | interiorit as | | |
| SIGNATURE | in, and accept t | the obligations of, Sec | ation 607.0505, Flo | was authoriza prida Statutes | ed by the t | orpo | ration | s board | of directors. I he | ereby accept th | ne appo | munon as | • | · · |
| SIGNATURE | in, and accept t | the obligations of, Sec inted name of registerial agen | otion 607.0505, Fto | orida Statutes | i. | ., | | Dodia | of directors. I he | ereby accept ti | | DATE | | |
| SIGNATURE. | th, and accept t | the obligations of, Sec inted name of registerial agen | ction 607.0505, Flo nt and short applicable ND DIRECTORS | orida Statutes | DIE: Registerad | Agent : | | 0 00010 | then reinstating | ereby accept the | | DATE | | |
| SIGNATURE 12. HILE | In, and accept to Signature types or pro | the obligations of, Sec ented name of registered agen OFFICERS AN | ction 607.0505, Flo nt and short applicable ND DIRECTORS | orida Statutes | DIE: Registered | Apent : | | 0 00010 | then reinstating | eby accept to | | DATE CERS AND | | ORS IN 12 |
| SIGNATURE 12. THEF | Signature types or pr PD MOYA, F | the obligations of, Section of the obligations of the obligation o | ction 607.0505, Flo nt and short applicable ND DIRECTORS | orida Statutes | 13. 1 171 | Agrant : TILE ME | signatur | e required w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 |
| SIGNATURE. 12. THE NAME STREET ADDRESS | PD MOYA, F 7480 FA | rnled have of registered again OFFICERS AN FRANK IRWAY DR | ction 607.0505, Flo nt and short applicable ND DIRECTORS | orida Statutes | 13. 1 1 1 1 1 1 2 NA 1 1 3 ST | Agrant : Tile Me Relit al | signatui | e required w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 |
| SIGNATURE 12. THE NAME SINEF ADDRESS C IY-SI-ZP | Signature types or pr PD MOYA, F | rnled have of registered again OFFICERS AN FRANK IRWAY DR | etion 607.0505, Flo nt and short algorizable ND DIRECTORS | orida Statutes iivo □ DELETE | 13. 1 1 17i 1 2 NA 1 3 ST 1 4 Ctl | Agrant : Tl.E .ME REUT AL | signatui | e required w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS C 1Y-ST-ZP THE | PD MOYA, F 7480 FAI MIAMI, F DS | reled have of registered agen OFFICERS AN FRANK IRWAY DR L 00000 | etion 607.0505, Flo nt and short algorizable ND DIRECTORS | orida Statutes | 13. 1 171 1 2 NA 1 3 ST 1 4 Ctl | Agrant : Tile Ime Imel' i ai Iy-st- | signatui | e required w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 |
| SIGNATURE 12. THEF NAME SIREF ADDRESS C 1Y - S1 - Z-P THEF NAME | PD MOYA, F 7480 FA MIAMI, F DS MCNULT | reled have of registered agen OFFICERS AN FRANK IRWAY DR L 00000 | etion 607.0505, Flo nt and short algorizable ND DIRECTORS | orida Statutes iivo □ DELETE | 13. 1 1 1 1 1 1 2 NA 1 3 ST 1 4 CH 2 1 TH 2 2 NA | Agrant : TILE IME REL' AI I'Y - ST - TLE ME | signatui iODRES: - ZIP | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 Addition |
| SIGNATURE 12. THEF NAME SINEF: ADDRESS C.TY.SE.ZP THEF NAME SINEF: ADDRESS SINEFE LADDRESS | PD MOYA, F 7480 FA MIAMI, F DS MCNULT | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | etion 607.0505, Flo nt and short algorizable ND DIRECTORS | orida Statutes iivo □ DELETE | 13. 1 1 17 1 2 NA 1 3 ST 1 4 CI 2 2 NA 2 3 STI | Agont: Tile ME REL I AI IY-ST- Tile ME REE I AI | signatur IODRES: - ZIP DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 Addition |
| SIGNATURE 12. THEE NAME STREET ADDRESS CTY-ST-ZP THEE NAME STREET ADDRESS CHY-ST-ZP THEE | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid storid algorithms. ND DIRECTORS | orida Statutes iivo □ DELETE | 13. 1 1 1 1 1 1 2 NA 1 3 ST 1 4 CH 2 1 TH 2 2 NA | Agrant : TILE IME TEET AI TEE ME REET AI TY-ST- | signatur IODRES: - ZIP DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTI Change Change | ORS IN 12 Addition |
| SIGNATURE 12. THE NAME STHEET ADDRESS ETY-SE-ZEP THE NAME STHEET ADDRESS ETT-ST-ZEP THEENAME STHEET ADDRESS ETT-ST-ZEP THEENAME | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid storid algorithms. ND DIRECTORS | orida Statutes inco DELETE | 13. 13. 1 171 1 2 NA 1 3 ST 1 4 CH 2 2 NA 2 3 STI 2 4 CH | Aprint: TILE IME REL' I AL IY-ST- TLE ME REET AL IY-ST- TLE | signatur IODRES: - ZIP DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO | ORS IN 12 Addition |
| SIGNATURE 12. THLE NAME SIREF ADDRESS CIY-SI-ZP THLE NAME SIREE LADDRESS CIT-S'-ZP THLE NAME SIREE LADDRESS CIT-S'-ZP | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid storid algorithms. ND DIRECTORS | orida Statutes inco DELETE | 13. 13. 1 1 71 1 2 NA 1.3 ST 1 4 CH 2 2 TT 2 2 NA 2 3 SH 2 4 CH 3 1 TH 3 2 NA | Admitis TILE ME REET AI TY-ST- TLE ME REET AI TY-ST- TLE ME ME ME ME | signatur IODRES: - ZIP DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTI Change Change | ORS IN 12 Addition |
| SIGNATURE 12. THEE NAME STREET ADDRESS CTY-ST-ZP THEE NAME STREET ADDRESS CHT-ST-ZP THEE NAME STREET ADDRESS CHT-ST-ZP THEE NAME STREET ADDRESS CHT-ST-ZP | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalid provided in the interest of the int | DELETE DELETE | 13. 13. 1 1 71 1 2 NA 1.3 ST 1 4 CH 2 2 TT 2 2 NA 2 3 SH 2 4 CH 3 1 TH 3 2 NA | Agrant : Tile Me RELT AI TY-ST- TILE ME RELT AI RELT AI | Signatur LODRES: - ZIP - DOPRES: | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTI Change Change | ORS IN 12 Addition |
| SIGNATURE 12. THEE NAME SHEEF ADDRESS CIY-SI-ZP THEE NAME SHEEF ADDRESS GIT-S'-ZP THEE NAME SHEEF ADDRESS GIT-S'-ZP THEE NAME SHEEF ADDRESS GIT-S'-ZP THEE NAME SHEEF ADDRESS GIT-SI-ZP THEE | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalid provided in the interest of the int | orida Statutes inco DELETE | 13. 1 1 71 1 2 NA 1 3 ST 1 4 CH 2 2 TH 2 2 NA 2 3 SH 2 4 CH 3 1 TH 3 2 NA 3 3 ST | Agent : TILE ME RELT AI IY-ST- TLE ME RELT AI Y-ST- TLE ME RELT AI ARELT AI | Signatur LODRES: - ZIP - DOPRES: | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTI Change Change | ORS IN 12 Addition |
| SIGNATURE 12. THUE NAME SHEEF ADDRESS CITY-ST-ZP THUE NAME SHEEF ADDRESS GITY-ST-ZP THUE NAME | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalid provided in the interest of the int | DELETE DELETE | 13. 1 1 TI 1 2 NA 1.3 ST 1 4 CIT 2 1 TI 2 2 NA 2.3 STI 3 1 TII 3 2 NA 3 3 ST 3 4 CIT 4 1 TIT 4 2 NAI | Agenti: TILE ME RELT AI TY-ST- TLE ME REET AI Y-ST- TLE ME ARELT AI TY-ST- TLE ME ARELT AI THE ME THE ME THE ME THE ME THE ME THE ME | signatur ODRES: ZIP DDRESS: ZIP | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change | ORS IN 12 Addition Addition |
| SIGNATURE 12. TILE NAME STREET ADDRESS C TY-ST-ZP TILE NAME STREET ADDRESS COTY-S'-ZP TILE NAME STREET ADDRESS COTY-S'-ZP TILE NAME STREET ADDRESS COTY-S'-ZP TILE NAME STREET ADDRESS STREET ADDRESS | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalid provided in the interest of the int | DELETE DELETE | 13. 1 171 12 NA 1.3 ST 1 4 CH 2 1 TH 2 2 NA 2 3 STH 3 1 TH 3 2 NA 3 3 ST 3 4 CH 4 1 TH 4 2 NAI 4 3 STE | Agent: TILE MME REFT AL TY-ST- TLE MME REET AL TY-ST- TLE MME REFT AL THE TY-ST- TLE MME REFT AL THE | Segrenarion DDRESS ZIP DDRESS ZIP DDRESS DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change | ORS IN 12 Addition Addition |
| SIGNATURE 12. THLE NAME STHEF ADDRESS CTY-ST-ZP THLE NAME STHEEL ADDRESS GTY-ST-ZP | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid ato it also | DELETE DELETE | 13. 1 17I 12 NA 1.3 ST 1 4 CIT 4 2 NAI 4 3 SIF 4 4 CIT 4 4 CIT | Agent: TILE MME REFT AL IY-ST- TILE MME REET AL Y-ST- LLE ME LLE ME ME REFF AL LLE ME ME REFF AL LLE ME | Segrenarion DDRESS ZIP DDRESS ZIP DDRESS DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change Change | ORS IN 12 Addition Addition Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS C 1Y-ST-ZP THE NAME STREET ADDRESS OUTY-ST-ZP THE | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid ato it also | DELETE DELETE | 13. 1 171 12 NA 1.3 ST 1 4 CH 2 1 TH 2 2 NA 2 3 STH 3 1 TH 3 2 NA 3 3 ST 3 4 CH 4 1 HT 4 2 NAI 4 3 STF 4 4 CH 5 1 TH | Agont: TILE ME REET AI TY-ST- TILE ME REET AI Y-ST- LE WE KEET AC LE LE | Segrenarion DDRESS ZIP DDRESS ZIP DDRESS DDRESS | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change | ORS IN 12 Addition Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS CTY-ST-ZP THE NAME STREET ADDRESS CTY-S'-ZP THE NAME NAME NAME NAME | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid ato it also | DELETE DELETE | 13. 1 171 12 NA 13 SI 1 4 CII 2 1 TI 2 NA 23 SII 3 1 TII 4 2 NA 4 SIF 4 CII 5 1 TII 5 2 NA | Againt : TILE ME REET AI Y-ST- TLE ME REET AI Y-ST- LE VE LE LE ME | SIGNATUR ADDRESS ZIP ADDRESS ZIP DDRESS ZIP | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change Change | ORS IN 12 Addition Addition Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS CTY-ST-ZP THE NAME STREET ADDRESS CTY-S' ZIP THE NAME STREET ADDRESS CTY-S' ZIP THE NAME STREET ADDRESS CTY-ST ZIP THE | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritaid ato it also | DELETE DELETE | 13. 1 17i 12 NA 13 ST 14 CII 2 1 TI 2 2 NA 23 STII 3 1 TII 4 CIT 5 1 TII 5 2 NA 5 3 STR | Agrical Title ME REFIT AI TY-ST- TITLE ME REFIT AI THE TY-ST- THE TY- | SEGNATURE SEGNAT | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change Change | ORS IN 12 Addition Addition Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS CTY-ST-ZP THE NAME STREET ADDRESS CTY-S'-ZP THE NAME STREET ADDRESS CTY-S'-ZP THE NAME STREET ADDRESS CTY-S'-ZP THE NAME STREET ADDRESS CTY-ST-ZP THE NAME STREET ADDRESS CTY-ST-ZP | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalidate intalidate into interest interest into interest | DELETE DELETE | 13. 1 171 12 NA 13 SI 1 4 CII 2 1 TI 2 NA 23 SII 3 1 TII 4 2 NA 4 SIF 4 CII 5 1 TII 5 2 NA | Agont : TILE ME REET AI IV-ST- TILE ME REET AI V-ST- LE ME REET AI REET AI V-ST- LE ME | SEGNATURE SEGNAT | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change Change Change | ORS IN 12 Addition Addition Addition Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS CTY-ST-ZP THE NAME STREET ADDRESS CTY-S'-ZIP THE NAME STREET ADDRESS CTY-S'-ZIP THE NAME STREET ADDRESS CTY-ST-ZIP THE NAME STREET ADDRESS CTY-ST-ZIP THE NAME STREET ADDRESS CTY-ST-ZIP THE | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalidate intalidate into interest interest into interest | DELETE DELETE DELETE | 13. 1 171 12 NA 13 SI 2 1 TI 2 2 NA 23 SII 3 1 TII 3 2 NA 3 3 SI 4 CII 5 1 TII 5 2 NA 5 3 SIR 5 4 CII 5 1 TII | Agont : Tile Me REET AI IV-ST- TILE ME REET AI FREET AI V-ST- LE ME REET AI LE ME REET AI LE ME | SEGNATURE SEGNAT | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change Change | ORS IN 12 Addition Addition Addition |
| THE THE TABLES OF THE THE TABLES OF TABLES OF THE TABLES OF TABLES OF THE TABLES OF TA | PD MOYA, F 7480 FA MIAMI, F DS MCNULT 7480 FAI | reled name of registered agen OFFICERS AN FRANK IRWAY DR FL 00000 IY, JOAN IRWAY DR | ction 607.0505, Floritalidate intalidate into interest interest into interest | DELETE DELETE DELETE | 13. 1 171 12 NA 13 ST 14 CH 2 111 2 2 NA 23 STH 3 1 TH 4 2 NA 4 3 STF 4 CH 5 1 TH 5 2 NA 6 1 TH 6 1 TH | Again : Tile Me REET AI IV-ST- TILE ME REET AI V-ST- LE ME REET AI ME | SEGNATURE SEGNAT | e roquired w | then reinstating | eby accept to | | DATE CERS AND | DIRECTO Change Change Change Change | ORS IN 12 Addition Addition Addition Addition |