ANNU	PORATION AL REPORT 1996	Secret: DIVISION OF	B. Morthar ary of State CORPORA	•			
Corporation							
MEDICA	al scholarship founi	DATION INC					
ncipal Place	of Business	Mailing Address				NA UNU DIVILONALI DIVILO	I A I AI A
1501 NW NORTH RIVER DR. 1501 NW NORTH RIVER MIAMI FL 33125 MIAMI FL 33125							
					3. Date Incorporated or Qualified 01/19/1961	3a. Date of La	ist Report /1995
Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
26 Suite, Apt. #, etc. Suite		26 Suite, Apt. #, etc.	uite, Apt. #, etc.		59-6153485	\$8.	Not Applicable 75 Additional
·····	· · · · · · · · · · · · · · · · · · ·	27 City & State			5. Certificate of Status Desired	L Fe	e Required
City & State		28			6. Election Campaign Financing Trust Fund Contribution	L Ad	.00 May Be ded to Fees
Zip	Country 25	Zip 29	30 Cou	ntry	 This corporation has liability for Florida Statutes 	intangible tax under	r s. 199.032,
	9. Name and Address of Curr			01 North	10. Name and Address of New F	Registered Agent	
	A 1101 (ļ	81 Name			
	ig, ann l Iapman field dr.			82 Street Add	ress (P.O. Box Number is Not Acceptat	же)	
MIAMI FI				83			
				64 City		FL ⁸⁵	Zip Code
. Pursuant to or registere familiar wit	ed agent, or both, in the State of Fli th, and accept the obligations of, Se	502 and 617.1508, Florida Statut lorida. Such change was authoriz ection 617.0503, Florida Statutes	es, the abo ed by the c s.	ve-named corpo corporation's boa	ration submits this statement for the pu and of directors. I hereby accept the app	rpose of changing it pointment as register	ts registered offic red agent. I am
familiar wit	(h, and accept the obligations of, Se Signature, typed or printed name of registered ag	ection 617.0503, Horida Statutes	š.	ve-named corporation's boa		DATE	
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