

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F95000005969 (9)

1. Corporation Name

ASCO HEALTHCARE, INC.



Principal Place of Business

Mailing Address

7130 MINSTREL WAY  
SUITE 215  
COLUMBIA MD 21045

7130 MINSTREL WAY  
SUITE 215  
COLUMBIA MD 21045

3. Date Incorporated or Qualified

12/07/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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.

SIGNATURE

Signature (typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	DELETE
NAME	MOSKOWITZ, MILTON S	
STREET ADDRESS	7130 MINSTREL WAY, STE 215	
CITY - ST - ZIP	COLUMBIA MD	
TITLE	P	DELETE
NAME	MILLER, MARY A	
STREET ADDRESS	7130 MINSTREL WAY, STE 215	
CITY - ST - ZIP	COLUMBIA MD	
TITLE	T	DELETE
NAME	KUHNLE, KENNETH R	
STREET ADDRESS	7130 MINSTREL WAY, STE 215	
CITY - ST - ZIP	COLUMBIA MD	
TITLE	S	DELETE
NAME	GUBERNICK, IRA C	
STREET ADDRESS	7130 MINSTREL WAY, STE 215	
CITY - ST - ZIP	COLUMBIA MD	
TITLE	D	DELETE
NAME	WALKER, MICHAEL R	
STREET ADDRESS	7130 MINSTREL WAY, STE 215	
CITY - ST - ZIP	COLUMBIA MD	
TITLE	D	DELETE
NAME	HOWARD, RICHARD R	
STREET ADDRESS	7130 MINSTREL WAY, STE 215	
CITY - ST - ZIP	COLUMBIA MD	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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)(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 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 this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lawrence M. Arma  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/20/96

301-725-0100  
Telephone #

CR2E034 (3/96)