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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name F97000004324 (6)

SARASOTA RESOURCES, INC.

Principal Place of Business

Mailing Address

FILED May 15 1998 8:00am Secretary of State



22 - Priporting Propose Prince Prin	155 STATE STREET HACKENSACK NJ 07601		C/O MEDICAL RESOURCES. INC. 155 STATE STREET HACKENSACK NJ 07801			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
2. Proposed Propose OPEN M.R. 22						. '	
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TALLAHASSEE FL 32301 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections EQ2 0502 and EQ7 1508, Florida Statutes, the abovernanced composition submits this statement for the purpose of changing its registered agent, ten imminist with, and accept the edifficience of Section EQ7 050, Florida Statutes. Signature Signature The state provisions of Sections EQ2 0502 and EQ7 1508, Florida Statutes, the abovernanced composition submits this statement for the purpose of changing its registered agent, ten imminist with, and accept the edifficience of Section EQ7 050, Florida Statutes. Signature The state provisions of Sections EQ2 050, Florida Statutes, the abovernanced composition submits this statement for the purpose of changing its registered agent, and the purpose of changing its registered segment and imminist and purpose of changing its registered agent. The state composition is a segment and accept the edifficience of Section EQ7 050, Florida Statutes Signature 12. Of LICE RS AN/O DIRI CIONS The provision Part of Sections State Sta	52	6 EA ST PARK AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Socious 607 0507 and 607 1500, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accorpt the objective of socious flored Statutes. SIGNATURE SIGNATURE PCD OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE PCD FARRELL, WILLIAM D STREET ADDRESS 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 15. STATE STREET 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 15. STATE STREET 15. STATE STREET 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 15. STATE STREET 15. STATE STREET 16. CITY-ST-2P HACKENSACK NJ DELETE 3. STREET ADDRESS 15. STATE STREET 15. STATE STR	TA	LLAHASSEE FL 32301			55017100		
11. Pursuant to the provisions of Suchors 607 05.02° and 607 15.08. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or bath, in the State of Liverta. Such of large was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent accept the objective state of 07.05.05. I horidal Statutes. SIGNATURE 12.				83			
11. Pursuant to the provisions of Sochoris 607 05.002 and 607 15.008. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligisteries of Socion 607 05.05, Floridal Statutes. SIGNATURE 12. OF ECERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE PCD STREET ADDISS 15.5 STATE STREET 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY-ST-ZIP 15. STATE STREET 15. STATE STREET 15. STATE STREET 15. STATE STREET 15. STATE STATE ST. 15. STATE STREET 15. STATE STATE ST. 16. CITY-ST-ZIP 17. CHORSEN 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. CHORSEN 15. STATE STREET 16. CHORSEN 17. CHORSEN 18. STATE STREET 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. CHORSEN 10. Change Addition 10. Change Add				84	City	FI 85 Zip Code	
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hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliesiental 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 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.