

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90040 043 \*\*\*158.75

DOCUMENT # F98000006827

1. Corporation Name

HOLLYWOOD RESOURCES, INC.

Principal Place of Business

% MEDICAL RESOURCES, INC. - LEGAL DEPT.  
155 STATE STREET  
HACKENSACK NJ 07601

Mailing Address

% MEDICAL RESOURCES, INC. - LEGAL DEPT.  
155 STATE STREET  
HACKENSACK NJ 07601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1998

4. FEI Number

22-3531745

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 OPEN MKT OF SOUTH FLORIDA  
3700 WASHINGTON STREET

26 C/O Medical Resources, Inc.

125 State Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 101

27 Suite 200 - Legal Dept.

City & State

City & State

23 HOLLYWOOD FLORIDA

28 Hackensack, New Jersey

Zip

Country

24 33021 25 USA

Zip

Country

29 07601 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME DRUMGOOLE, MICHAEL J  
STREET ADDRESS 155 STATE STREET  
CITY-ST-ZIP HACKENSACK NJ 07601

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VS ☐ DELETE  
NAME JOYCE, CHRISTOPHER J  
STREET ADDRESS 155 STATE STREET  
CITY-ST-ZIP HACKENSACK NJ 07601

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE VT ☐ DELETE  
NAME WHYNOT, GEOFFREY A  
STREET ADDRESS 155 STATE STREET  
CITY-ST-ZIP HACKENSACK NJ 07601

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME MONTOPOLI, DUANE C  
STREET ADDRESS 155 STATE STREET  
CITY-ST-ZIP HACKENSACK NJ 07601

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4-27-99 (201) 488-6230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL J DRUMGOOLE PRESIDENT

Date

Daytime Phone #

CR2E034 (1/98)