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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # G86036

(2)

Substitution Subs	ONCOLO	OGY HEMATOLOGY CONS	ultants, p.a.			
Principal Place of Business	3131 SOUTH TA	AMIAMI TRAIL	3131 SOUTH TAMIAMI TRAI	IL.	THE STATE SECTION OF STATE WHO SHE	Class actors (191) by Div State Block about
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City & State		# elc		· · · · · · · · · · · · · · · · · · ·	59-2308334	CO 75 A 180
City & State City Country St. This corporation has flability for high-righble tax under s. 199.032, Portide Statutes City Cit	F		—		5. Certificate of Status Desired	
Country Zip 20 So Country Zip 20 So Country So This corporation has liability for improfible tax under s. 199.032 Zip So So So So So So So S		e	City & State		6. Election Campaign Financing	\$5.00 May Be
26						
9. Name and Address of Current Registered Agent GOLDMAN, STEPHEN H. 3131 SOUTH TAMAMI TRAIL SARASOTA FL 34239 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 95 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 807.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the eppointment as registered agent and analysis with, and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the eppointment as registered agent and analysis with, and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the eppointment as registered agent and analysis agent and accept the obligations of, Section 607.0505, Florids Statutes, the obligation of Section 607.0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the eppointment as registered agent and analysis agent and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the eppointment as registered agent and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the eppointment as registered agent and accept the obligations of, Section 607.0505, Florids Statutes, the above-named corporation's board of directors. I hereby accept the eppointment as registered depends on the accept the obligation of, Section 607.0505, Florids Statutes, the above named corporation submits this statement for the purpose of charging is registered depends on the purpose of charging is registered agent and accept the obligation of, Section 607.0505, Title Charge I hadden and accept the obligation of, Section 607.0505, Title I hadden I hadden I hadden	—	·				
SULTM TAMAM TRAL SARASOTA FL 34239 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0502 and 607.1508. Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE PSD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICER	24			301		
SIGNATURE 12. OFFICERS AND DIRECTORS 13. SINEH AMBRISS SIREH AMBRISS SINEH AMBRISS SINEH AMBRISS CITY-ST-2P INTE BROWN, RICHARD H 3131 SOUTH TAMIAMI TRAL SARASOTA FL SINEH AMBRISS SINEH AMB	GOL	DMAN. STEPHEN H.	· · · · · · · · · · · · · · · · · · ·	81 Name		
SARASOTA FL 34239 83 84 City FL 85 Zip Code T1. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing this registered agent an immirral market with, and accept the obligations of Section 607.0505, Florida Statutes, the above-harmed corporation's board of directors. I hereby accept the appointment as registered agent an immirral market with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME SIGNATURE GOLDMAN, STEPHEN H. 3131 SOUTH TAMIAMI TRAIL SARASOTA FL DELETE 1.1 ITHE Change Addition NAME SIGNAT ARCHESS SIGNATURES SARASOTA FL DELETE 31 TITLE Change Addition Addition NAME SIGNAT ARCHESS SIGNAT A				82 Street Addr	ess (P.O. Box Number is Not Accepta	ble)
Section Sect	SAR	ASOTA FL 34239				
11. Pursuant to the previsions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 spread rune of imposered agent and the Halphorated (Port Registered Agent agration when rendering) DATE	}			83		
Title Pursuant to the provisions of Sections 607 0507 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Separation Section 607.0505, Florida Statutes. Section 607				84 City		85 Zip Code
Style-te, byred or princing agent and site is agentation (NOTE Registration Apert agentation required winner remeating) DATE		to the provisions of Sections 607.05 egisterod agent, or both, in the Stat im familiar with, and accept the obli	02 and 607, 1508, Florida Statute e of Florida. Such change was a gations of, Section 607,0505, Flo	es, the above-named corp authorized by the corporat rida Statutes.	oration submits this statement for the ion's board of directors. I hereby acce	
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14. I do 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.

SIGNATURE:

FILED

May 06 1997 8:00am

Secretary of State

Daytime Phone #