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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

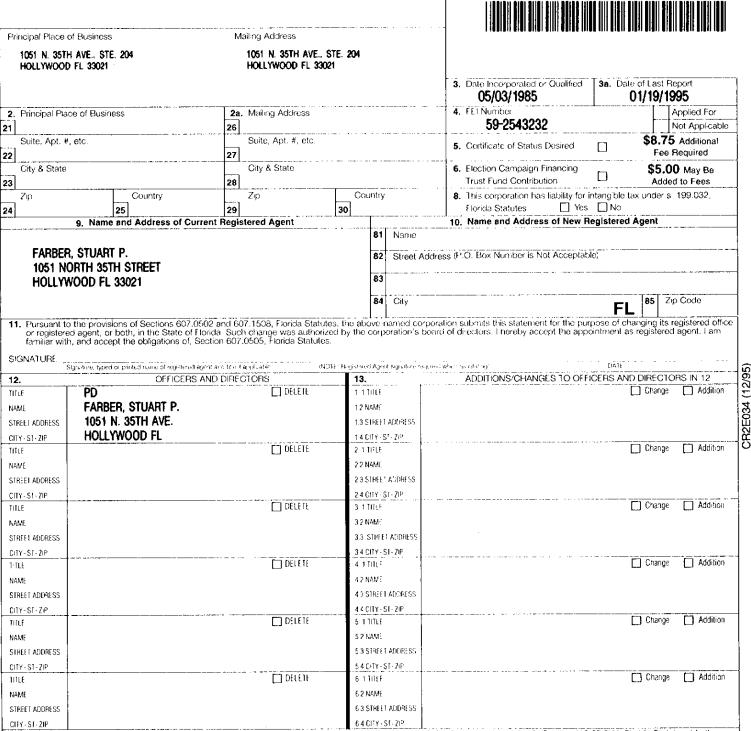
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Corporation Name

DOCUMENT #

FLORIDA VASCULAR LABORATORY, INC.



14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the excription 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 trusted 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.

NUMBE AND TYPED OR PRINTED NAME OF

3 22 96 305 962 9311