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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State >

1997				Secretary of State > DIVISION OF CORPORATIONS		Secretary of State			
	IMENT # on Name ATORY MEDI	K50234	(9)						
11201 111	ATOTT MEDI								
Principal Place of Business  508 CENTRAL AVE.  CRESCENT CITY FL 32112  US		Mailing Address 508 CENTRAL AVE. CRESCENT CITY FL 32112-2504 US		( 188484)) 901 81111 <b>6</b> 814 <b>6</b> (1888 11111 8131	OPERF BION	02811 DIDIN B7B11	U73H (UU)		
						3. Date Incorporated or Qualified 12/02/1988		ate of Last H /01/1996	leport
2. Principal f	Place of Business		2a. Mailing Address 26			4. FEI Number 59-2935017	1. 501	Ar	pplied For of Applicable
Suite, Apt	#, etc.		Suite, Apt. #. etc.			5. Certificate of Status Desired	×	\$8.75	Additional equired
City & Sta	ile		City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 24	24 25		Zip         Country           29         30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes XNo			
		Address of Current F	Registered Agent			10. Name and Address of New Re	gistered	Agent	
GERARD BUCHAN				81 N	ame				
508 CENTRAL AVENUE CRESCENT CITY FL 32112			82 Street Add		ess (F.O. Box Number is Not Acceptab	ole)			
Orac	LOOLINI OITI II	LOETIE		83					
				84 C	ity				0-1-
					•		FL	_ [ ] .	Code
<ol> <li>Pursuant office or</li> </ol>	to the provisions registered agent.	of Sections 607.0502 a or both, in the State of	ind 607.1508, Florida State Florida: Such change was	utes, the above-na	med corp	poration submits this statement for the prior's board of directors. Thereby acception's	urpose o	of changing it	is registered
agent. La	am f <b>ami</b> lliar with, a	nd accept the obligation	oris of, Section 607.0505, F	lorida Statutes.	•				
SIGNATURE	Signature, typed or pur	ated name of registered against a	nd talent applicable (NC	OT L. Rog stered Agent se	gnature reque	ed when reinstaling)	DATE		
12.		OFFICERS AND F	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AN	D DIRECTOF	RS IN 12
TITLE	PD DUCHAN OF	DADD	DELETE	1.1 TITLE				Change	Addit-on
NAME	BUCHAN, GE	RONDO ROAD		1.2 NAME					
STREET ADDRESS CITY-ST-ZIP	CRESCENT C			1.3 STREET ADD	ľ				
TITLE	SD		DELETE	1.4 CITY - ST - ZIE 2.1 TITLE				Change	Addilion
NAME	BUCHAN, CA	ROLYN W.	_	2.2 NAME					
STREET ADORESS		RONDO ROAD		2.3 STREET ADD	RESS				
CITY-ST-ZIP	CRESCENT C	ITY FL		2. 4 CITY - ST - ZI	P				
TITLE '	1		DELETE	3.1 TITLE				☐ Change	Addition
NAME *				3 2 NAME					
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CITY - ST - ZIP				4.4 CHY-ST-ZIF					
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NAME				5.2 NAME		30000224 -07/24/970100	)du o r :	フラ 18	
STREET ADDRESS				5 3 STREET ADDS	i	***333.75	,	10	
CITY-ST-ZIP TITLE		<del></del> <del></del>	DELLETE	5.4 CHY-ST ZIE 6.1 THLE	<u></u>			Çhange	Addition
NAME				62 NAME		40000224 -07/24/970100	61	<b>5</b> Å . ^	ノブ
STREET ADDRESS				C.3 STREET ADDI	RESS	-07/24/970100	190	19, 1,0	81 O

14. I do hereby certify that the information symplicid with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 it changed, or on a sattactiment with an address.

FILED

Jul 23 1997 8:00am