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 # **K77460**

(9)

MED CEN	NTER DIAGNOSTICS, INC.	· · ·				DERLE REDEK BEDEK AFON DERLE AN	iii 111 1	
Principal Place	e of Business	Mailing Address						
107A JFK DRIVE 160 JKF DRIVE STE 201 ATLANTIS FL 33462 ATLANTIS FL 33462								
<u> </u>		US			3. Date Incorporated or Qualified 04/04/1989	3a. Date of Last Re 02/27/1996	porl	
	lace of Business	2a. Mailing Addres	s	-	4. FEI Number	} -	lied For	
Suite, Apt #, etc		Suite Apt # et	Suite, Apt. #, etc.		65-0117577	Not Applicable \$8.75 Additional		
22	.,	27			5. Certificate of Status Desired	Fee Rec		
City & State	0	City & State			6. Election Campaign Financing	\$5.00	May Be	
indicate the second control of the second co		28			Trust Fund Contribution Added to Fees			
Zip 24	Country Zip		Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	9. Name and Address of Curre		130		10. Name and Address of New Re			
SUDDUTH, NORMAN C. 5215 PENNOCK POINT RD. JUPITER FL 33458			1_1	reet Addre 500	eph K. Still, Jr. sss (P.O. Box Number is Not Acceptable) Australian Avenue South te 600			
			1 1		t Palm Beach	FL 85 Zip C	401	
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both in the State	02 and 607.1508, Florida e of Florida. Such change	Statutes, the above-na	med corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose of changing its of the appointment as r	registered egistered	
agent. 1	in familiar with, and accept the oblic	nations of Section 607.05	05, Florida Statutes. 「アルレムコ	R	41	120197		
SIGNATURE	Signature Accilior partition have or registered as	Corl and tille if applicable.	(NOTE Registered Agent s	nature require	d when teinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		IN 12	
TITLE	PVP	DELE	TE 1.1 TITLE	7		☐ Change	Addition	
NAME	EDDY, TILLMAN L.		1.2 NAME					
STREET ADORESS	1501 39TH STREET WEST PALM BEACH FL		1.3 STREET ADD	- 1			ļ	
CITY-ST-ZIP THILE	S S	DELE	1 4 CiTY - ST - Zi TE 2.1 TITLE	·		Change	Addition	
NAME	SUDDUTH, NORMAN C.		2.2 NAME	1				
STREET ADDRESS	5215 PENNOCK POINT RD		2.3 STREET ADD	RESS				
CITY - ST - ZIP	JUPITER FL		2. 4 CITY-ST-Z	P	<u> </u>			
TITLE	DELETE		TE 3.1 TITLE			☐ Change	☐ Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADD	1				
CITY - ST - ZIP		DELE	3.4. CITY-ST-Z	P		Change	Addition	
TITLE :			4.1 TITLE 4.2 NAME			LT Change		
STREET ADDRESS			4.3 STREET ADD	RESS			ſ	
CHTY-ST-7IP			4.4 CITY - ST - ZI	- 1				
lilité		DELE				Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADD	RESS .				
CiTY+S1+ViP	······································	17 600	5.4 CITY - ST - ZI	<u>`</u>		T 6	1 1 2 200	
117[[DELE			· ·	Change	Addition Addition	
NAME CIDCLE ADDRESS			6 2 NAME	ncec				
STREET ADORESS			63 STREET ADD	1				
14. I do here!	Legistry that the information supplied	ed with this filing does no	64 CITY-ST-2 t qualify for the exemp	ion stated	in Section 119.07(3)(i), Florida Statuto	es. I further certify that t	he	
informatio Lam an o appears i	on indicated on this annual report or fficer or director of the corporation on the Block 12 or Block 17 it disapped (supplemental annual rep or the receiver or trustee or or on an attaurned with	ort is true and accurát impowered to execute an address.	and that this report	my signature shall have the same leg t as required by Chapter 607, Florida	al effect as if made und Statutes; and that my na	er oath; that ame	

SIGNATURE

4/24/97 (56) 967-5733

FILED

Apr 30 1997 8:00am

Secretary of State