FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



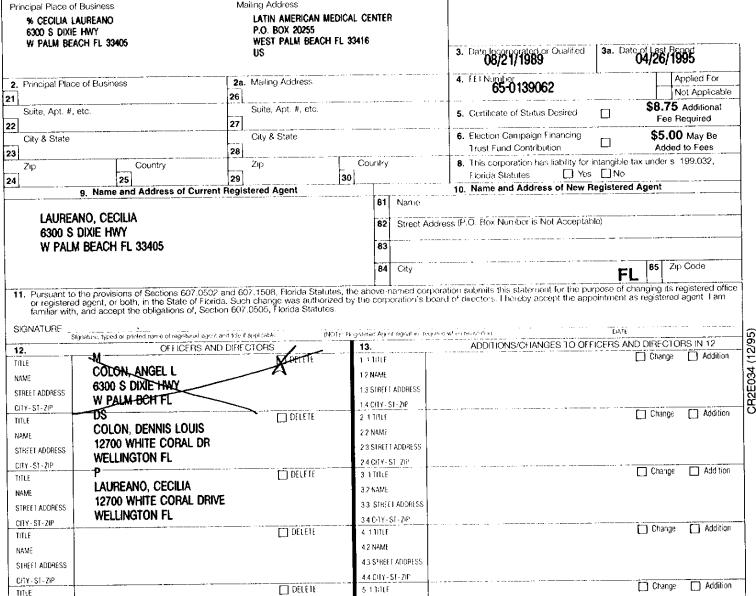
FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

LATIN AMERICAN MEDICAL CENTER CORP.



CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer appears in Block 12 or ment with an address.

5.2 NAME

6 1 TILLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CIDY - ST-ZIP

5.4 CITY - ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

DITY-ST-ZiP

DELETE.

03/21/96 (407) 5P6-765F

☐ Change

Addition

E034