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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

1996

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(9)

	MEDICAL CORPORATION					EN DIEN BIEN IN
Principal Place o	of Business	Mailing Address		100//8/100/100/100/100/100/100/100/100/1		
C/O CCOM 201 S BISCAYNE BLVD 201 S BISCAYNE BLVD. 1600 MIAMI CTR MIAMI FL 33131 US US				Date Incorporated or Qualified	3a. Date of Last R	eport
00		00		06/15/1990	04/07/1	
. Principal Plac	be of Business	2a. Mailing Address	1 1-7-th an-	4. FEI Number		Applied For
1/4/20	NW 361 9T	26 10008 N	w 17th, et	65-0201830		Not Applicable
Suite, Apt #		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Required
City & State	MI FLORIDA	28 COOL S	ADINGS FL	Election Campaign Financing Trust Fund Contribution		May Be
さ	166 25 DADE	29 Zip 3300) 1	30 Count DANE	8. This corporation has liability for in Florida Statutes Yes	intangible tax under s	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	Registered Agent	
			81 Name			
KLETSEL, NESTOR			82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)	
	NW 17TH COURT					
CORAL	SPRINGS FL 33071		83			
			84 City			o Code
					FL I I	
or registere	d agent, or both, in the State of Florida Land accept the obligations of Section	and 607, 1505, Fighida Statute a. Such change was authorize n 607,0505. Florida Statutes	is, the above-named corpored by the corporation's boa	ration submits this statement for the pur ard of directors. I hereby accept the appo	rpose of changing its ri ointment as registered	egistered offic agent. I am
larimar with	i and decept the congressions of ocone	in oon loods, include ballance.				
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