

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company PHYSICIANS' ONCOLOGY NETWORK, L.C. 201 S. BISCAYNE BLVD STE 3000 MIAMI FL 33131	DOCUMENT # 195000000596
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FILED
99 MAR 22 AM 8:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	2a. Mailing Address Suite, Apt. #, etc. City & State Zip	3. Date Organized or Qualified 08/03/1995	3a. State of Formation FL
		4. FEI Number 65-0620569	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report 04/27/1998	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent B & C CORPORATE SERVICES, INC. 201 S. BISCAYNE BLVD STE 3000 MIAMI FL 33131	8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (Not for Registered Agent Signature, and when used, must be dated)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	KALMAN, LEONARD M.D.	8740 N. KENDALL DR. SUITE 3	MIAMI FL
MGR	RYMER, WILLIAM M.D.	5700 N. FEDERAL HIGHWAY	FORT LAUDERDALE FL
MGR	BERKOWITZ, LLOYD M.D.	16313 SOUTH MILITARY TRAIL	DELRAY BEACH FL
MGR	SIRPAL, SURENDRA M.D.	190 JOHN F. KENNEDY DRIVE	ATLANTIS FL

11. I do hereby certify that the information supplied with this filing 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 oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:  3/17/99