

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M66757 (9)

1. Corporation Name

MANAGED ADMISSIONS, INC.



Principal Place of Business

7990 SW 117TH AVENUE
BOX 839000
MIAMI FL 33283-6000

Mailing Address

7990 SW 117TH AVENUE
BOX 839000
MIAMI FL 33283-6000

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt., #, etc.

26 Suite, Apt., #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

~~FELDER, HARVEY L.~~
7990 S.W. 117TH AVENUE, SUITE 112
MIAMI FL 33183

3. Date Incorporated or Qualified
02/02/1988

3a. Date of Last Report
04/19/1995

4. FEI Number
65-0045213

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name ANTONIO J. CASTRO
82 Street Address (P.O. Box Number is Not Acceptable)
7990 S.W. 117TH AVE
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

ANTONIO J. CASTRO

4/29/96

Signature of person appointed as registered agent or alternate agent (Block 12)
Signature of person appointed as registered agent or alternate agent (Block 13)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
V	MIZELS, LORI	7990 S.W. 117TH AVENUE	MIAMI FL	<input type="checkbox"/>
V	GETELMAN, KAREN	12378 COMMONWEALTH AVENUE	NEWTON MA	<input type="checkbox"/>
ST	CASTRO, ANTONIO J.	7990 SW 117TH AVE	MIAMI FL	<input type="checkbox"/>
D	GROSSMAN, PHYLLIS	7990 S.W. 117TH AVENUE	MIAMI FL	<input type="checkbox"/>
DP	GROSSMAN, WILLIAM I	7990 SW 117TH AVE	MIAMI FL	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	5. CHANGE	6. ADDITION
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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14. I do 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 appears in Block 12 or Block 13 if changed, or on a separate attachment with an address.

SIGNATURE:

[Signature]

ANTONIO J. CASTRO

4/29/96 (305) 595-4040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)