
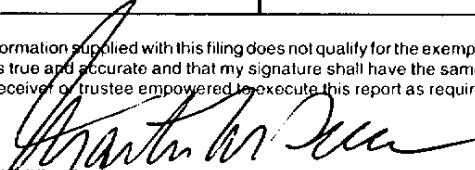


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M98000000602 PROTOCOL POINT OF CARE LABORATORY MANAGEM NT, L.L.C. 18-2 EAST DUNDEE ROAD, SUITE 202 BARRINGTON IL 60010		1a. Principal Place of Business Address 18-2 EAST DUNDEE ROAD, SUITE BARRINGTON IL 60010			
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 06/10/1998 3a. State of Formation DE 4. FEI Number 36-4099462 5. Date of Last Report 6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		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 FL			
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) (NOTE: Registered Agent's signature required when terminating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	FREIBRUN, RICHARD B	7819 MAPLE STREET		MORTON GROVE IL	
MGRM	ROOT, CHARLES DR.	18-2 EAST DUNDEE ROAD, SUITE 202		BARRINGTON IL	
MGRM	PELLER, J. ROBERT	175 E. DELAWARE PLACE, SUITE 202		CHICAGO IL	
MGRM	ROBERTSON, KENNETH H	855 S. FEDERAL HIGHWAY, SUITE 202		BOCA RATON FL	
MGRM	WOCHNA, GERALD	2029 N.W. 30TH ROAD		BOCA RATON 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: 		MARTIN M. TRAX		4/28/99 848 381-2060	