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Jun 25 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000005554 (7)
1. Corporation Name
ACUPUNCTURE MEDICAL CENTER, INC OF SOUTH FLORIDA

Principal Place of Business 200 KNUTH ROAD STE 248AB BOYNTON BEACH FL 33436	Mailing Address 4742 NW 6 AVE POMPANO BEACH FL 33064
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2. Principal Place of Business 21 4845 N. DIXIE HWY Suite, Apt. #, etc.	2a. Mailing Address 26 4742 N. W 6th AVE Suite, Apt. #, etc.
22 City & State 23 POMPANO Bch, FL Zip Country 24 33064 25 USA	27 City & State 28 POMPANO BEACH, FL Zip Country 29 33064 30 USA

9. Name and Address of Current Registered Agent THEUS, SAINLOUITANE 4742 NW 6 AVE POMPANO BEACH FL 33064	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE SAINLOUITANE THEUS, PRESIDENT Sain Louitane Theus May 5, 98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT SAINLOUITANE THEUS 4742 N. W 6th AVE POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT ALBA LUCIA PEREZ 2431 N. 59th TERRACE HOUSTON, TX 77058
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADMINISTRATOR / CEO KESNEL THEUS 4742 N. W 6th AVE POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER DR. SAID AHMED KORANY, A.P. 9873 LAWRENCE RD # 1209 BOYNTON BEACH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LENDI THEUS, T 4742 N. W 6th AVE POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	YIHONG HAO, T 260 N. W 19th STREET BOCA RATON, FL 33432

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	IPHANISE JOSEPH, T 700 N.E 26th COURT #6 WILTON MANORS, FL 33305
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. I 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: KESNEL THEUS May 5, 98

CR2E037 (10/97)