FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

FILED 95 APR 27 PM 12:04

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P07531 (7)

1. Corporate Name

PRIVATE MEDICAL-CARE, INC.

Principal Place of Business: 12898 TOWNE CTR DR, CERRITOS CA 90701, US

Mailing Address: 12898 TOWNE CTR DR, CERRITOS CA 90701, US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/24/1985

3a. Date of Last Report: 04/27/1994

4. FEI Number: 95-2641865 [ ] 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

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [ ] — $68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. [ ] Yes [X] No

2. Principal Place of Business — 21 / 22 State Apt # etc / 23 City & State / 24 Zip 90703 / 25 Country

2a. Mailing Address — 26 / 27 State Apt # etc / 28 City & State / 29 Zip 90703 / 30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
8751 W. BROWARD BLVD.
PLANTATION FL 33324

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

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 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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Field	Entry
TITLE	P
NAME	ELLIOTT, ROBERT B.
STREET ADDRESS	12898 TOWNE CTR DR
CITY-ST-ZIP	CERRITOS CA
TITLE	VD
NAME	CONKLING, DONALD B.
STREET ADDRESS	100 FIRST STREET
CITY-ST-ZIP	SAN FRANCISCO CA
TITLE	S
NAME	RAFTER, SHARON L.
STREET ADDRESS	100 FIRST STREET
CITY-ST-ZIP	SAN FRANCISCO CA
TITLE	TD
NAME	JAEGER, JOSEPH C.
STREET ADDRESS	100 FIRST STREET
CITY-ST-ZIP	SAN FRANCISCO CA
TITLE	D
NAME	FIELD, JOHN F., D.D.S.
STREET ADDRESS	100 FIRST STREET
CITY-ST-ZIP	SAN FRANCISCO CA
TITLE	D
NAME	WARD, WILLIAM T.
STREET ADDRESS	100 FIRST STREET
CITY-ST-ZIP	SAN FRANCISCO CA

13. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS

Field	Entry	Change	Addition
1 TITLE	D	[X]	[ ]
2 TITLE		[ ]	[ ]
3 TITLE		[ ]	[ ]
4 TITLE	D	[X]	[ ]
5 TITLE		[ ]	[ ]
6 TITLE		[ ]	[ ]

14. 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 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 an attachment with an address.

SIGNATURE: Robert B. Elliott, Director 04/25/95 (310)9248311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0074004