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FILED
Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1998

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

DOCUMENT # P13803 (2)

1. Corporation Name
MICROMEDEX, INC.

Principal Place of Business	Mailing Address
6200 S. SYRACUSE WAY SUITE 300 ENGLEWOOD CO 80111-4740	6200 S. SYRACUSE WAY SUITE 300 ENGLEWOOD CO 80111-4740

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/27/1987

4. FEI Number: 84-0740525 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2a. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAUL, JAMES GORDON ONE STATION PLACE STAMFORD CT	☒ DELETE	1.1 TLE / 1.2 AME / 1.3 REET ADDRESS / 1.4 TY-ST-ZIP	J Noble, Rick 6200 S. Syracuse Way Ste 300 Englewood, Co 80111	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COB SCHLEGEL, WILLIAM A. FIVE PARAGON DRIVE MONTVALE NJ	☐ DELETE	2.1 TLE / 2.2 ME / 2.3 REET ADDRESS / 2. TY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCEO WINOKUR, MARILYN 6200 S SYRACUSE WAY STE 300 ENGLEWOOD CO	☐ DELETE	3.1 LE / 3.2 ME / 3.3 REET ADDRESS / 3. Y-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARRIS, MICHAEL S. ONE STATION PLACE STAMFORD CT	☐ DELETE	4. E / 4. ME / 4. EET ADDRESS / 4. Y-ST-ZIP	100002506521 -06/19/98--01110--042 ***150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUMACK, BARRY H. M.D 6200 S SYRACUE WAY SUITE 300 ENGLEWOOD CO	☒ DELETE	5. E / 5.2ME / 5.3REET ADDRESS / 5.4Y-ST-ZIP	D/V Howerton, A. C. 6200 S. Syracuse Way Ste 300 Englewood, Co. 80111	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST CARNEY, JAMES D 6200 S SYRACUSE WAY STE 300 ENGLEWOOD CO	☒ DELETE	6.TLE / 6.AME / 6.3REET ADDRESS / 6.4Y-ST-ZIP	S/T Batchelder, Ted 6200 S. Syracuse Way Ste 300 Englewood, Co 80111	☐ Change ☒ Addition

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

CR2E034 (10/97)