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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # P33350** 

May 14 1997 8:00an	
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Secretary of State	

1. Corporation Name MEDE AMERICA, INC.  Principal Place of Business  333 OVINGTON BLVD. MITCHELL FIELD NY 11553  By MERRICK AVENUE EAST MEADOWS NY 11554-1500 US								
					<ol> <li>Date Incorporated or Qualified 03/12/1991</li> </ol>		te of Last <b>/01/199</b>	
-1	lace of Business	2a. Mailing Address			4. FEI Number 14-1704493		<b></b>	Applied For
I   Sude, Apt. ⊇	#, clc.	Suite, Apt. #, etc.			Certificate of Status Desired		\$8.75	Not Applicable Additional Required
City & State	£	City & State			6. Election Campaign Financing			O May Be
]		28		1	Trust Fund Contribution	' D		o may be d to Fees
Zip	Country	Ζιρ	Country		8. This corporation has liability for			s. 199.032,
<u> </u>	25 9. Name and Address of Curre	29	30		Florida Statutes  10. Name and Address of New	Yes [		
ın	RENZ, LAURIE	nt Hegisterød Agent	81 Nam		10. Name and Address of New	Hegisterau /	Agent	····
	0 274 YOUNGSTOWN PKWY							
	TAMONTE SPRINGS FL 32714		82 Stree	et Address	s (P.O. Box Number is Not Accep	Habie)		
			83		·			
			84 City				85 Zij	p Code
						FL		
office or r agent. Fa	egistered agent, or boot, in the state im familiar with, and accept the oblig	e of Florida. Such change was gations of, Section 607.0505, F	authorized by the cliorida Statutes.	orporation	ation submits this statement for the 's board of directors. I hereby acc	cept the app	ointment a	as registered
agent La SIGNATURE. 12.	rm familiar with, and accept the oblig Signature, typod or printed name of registered as	gations of, Section 607.0505, Figent and Irlin if applicable (NCND DIRECTORS	Orida Statutes.  OTE Registered Agent signal  13.		377	DATE	DIRECTO	DRS IN 12
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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 of 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: