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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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May 13 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000015597 (6)

COCOR; COST CONTAINMENT & RECOVERY, INC.

Principal Place of Business Mailing Address P.O. BOX 898 7080 28TH COURT E. ONECO FL 34264-0898 SARASOTA FL 34243 3a. Date of Last Report 3. Date Incorporated or Qualified 02/25/1993 10/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0394980 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z_{\rm ID}$ Country 8. This corporation has fiability for inlang ble tax under s. 199 032, 24 ☐ Yes ☐ No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HAYDEN-PETRAT, CINDY **6736 26TH STREET W** 82 Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34207** 83 Zip Code 84 City 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 (NOT): Begintered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE Change Adoition TITLE 11000 HAYDEN-PETRAT, CINDY NAME 12 NAME Willard Petrat CR2E034 **6736 26TH STREET W** STREET ADORESS 1.3 STREET ADDRESS P. O. Box 898 N/A BRADENTON FL 34207 Oneco, FL CITY-ST-ZIF 14 CHY-ST-ZIP DELETE X Addition Change 21 TITLE TITLE 2.2 NAME Jessie Petrat P. O. Box 898 N/A 2.3 STREET ADDRESS STREET ADDRESS Oneco, FL 34264 CITY-ST-ZIP 2 4 City - St - ZiP X Addition DELETE TITLE 3.1 3111.6 Change 3.2 NAME Cindy Petrat Hayden STREET ADDRESS 3.3 STREET ADDRESS 6736 26th Street W. CITY-ST-ZIP 3.4 CHY-ST-7P Bradenton, FL 34207 DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-ZIP 4.4 CI1Y - \$1 - 7IP Change DELETE Addition TITLE 51 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CHTY - ST - ZiF CITY-ST-ZIP DELFTE Change Addition 6.1 THE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CHY - \$1 - ZIP 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the

CHATHER / // / C. 101 Proper Harrow Dia Wroles aux 255 2075

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 eath, 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