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FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000034045 (3)

1. Corporation Name
CONSUL-MED, INC.

Principal Place of Business

3275 W. HILLSBORO BLVD.
SUITE 207
DEERFIELD BCH. FL 33442
US

Mailing Address

3275 W. HILLSBORO BLVD.
SUITE 207
DEERFIELD BCH. FL 33442-9410
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

05/11/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0410693

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MILLER, ALAN M.D.
3275 W. HILLSBORO BLVD.
SUITE 207
DEERFIELD BCH. FL 33442

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

TITLE P ☐ DELETE

NAME MILLER, ALAN M.D.
STREET ADDRESS 3275 W. HILLSBORO BLVD., SUITE 207
CITY - ST - ZIP DEERFIELD BCH. FL

TITLE TS ☒ DELETE

NAME WALLACE, MITCHELL
STREET ADDRESS 3275 W HILLSBORO BLVD SUTE 207
CITY - ST - ZIP DEERFIELD BEACH FL

TITLE V ☒ DELETE

NAME LESUE, LAZSARUS
STREET ADDRESS 3275 W HILLSBORO BLVD SUTIE 207
CITY - ST - ZIP DEERFIELD BEACH FL

TITLE TS ☐ DELETE

NAME SYED NARVI
STREET ADDRESS 3275 W HILLSBORO BLVD SUITE 207
CITY - ST - ZIP DEERFIELD BEACH, FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

954-421-6246

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CR2E034 (9/96)