

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P93000041156 (9)

1. Corporation Name
EMZA, INC.

Principal Place of Business
1200 S PINE ISLAND RD
SUITE 600
PLANTATION FL 33324

Mailing Address
1200 S PINE ISLAND RD
SUITE 600
PLANTATION FL 33324

FILED

98 JUL 27 PM 5:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500002599985--0



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	3000 Galleria Tower	06/10/1993	
22	City & State	27	Suite 1000	4. FEI Number	
23	Zip	28	Birmingham, AL	65-0421565	
24	Country	29	33244	Applied For	
		30		Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 S PINE ISLAND ROAD, SUITE 250 PLANTATION FL 33324		81 Name Corporation Service Company	
		82 Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street	
		83	
		84 City Tallahassee	
		FL 85 Zip Code 32301	

11. Pursuant to the provisions of Sections 607.0102 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: *Sandra B. Mortham* (NOTE: Registered Agent signature required when reinstating) DATE: 7/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	D/V/T
NAME	FINDEISS, J C	1.2 NAME	James M. Dickerson, Jr.
STREET ADDRESS	1200 S PINE ISLAND RD SUITE 600	1.3 STREET ADDRESS	3000 Galleria Tower, Suite 1000
CITY-ST-ZIP	PLANTATION FL	1.4 CITY-ST-ZIP	Birmingham, AL 35244
TITLE	PD	2.1 TITLE	D/V/S
NAME	ZAMBETTI, JOHN	2.2 NAME	Tracy P. Thrasher
STREET ADDRESS	725 ARIZONA AVE SUITE 204	2.3 STREET ADDRESS	3000 Galleria Tower, Suite 1000
CITY-ST-ZIP	SANTA MONICA CA	2.4 CITY-ST-ZIP	Birmingham, AL 35244
TITLE	ST	3.1 TITLE	P
NAME	WEINSTEIN, VICTOR J	3.2 NAME	H. Lynn Massingale, MD
STREET ADDRESS	1200 S. PINE ISLAND ROAD SUITE 600	3.3 STREET ADDRESS	1900 Winston Road, Suite 300
CITY-ST-ZIP	PLANTATION FL 33324	3.4 CITY-ST-ZIP	Knoxville, TN 37919
TITLE	AS	4.1 TITLE	
NAME	MCCLEARY JR., GEORGE W	4.2 NAME	
STREET ADDRESS	1200 S. PINE ISLAND ROAD SUITE 600	4.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	
NAME	BLANFORD, MARY ANN	5.2 NAME	
STREET ADDRESS	1200 S. PINE ISLAND ROAD SUITE 500	5.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE:

Tracy P. Thrasher
VP & Secretary

7/21/98 205-733-8996

CR2E034 (10/97)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 903532 4390339

AUTHORIZATION : *Patricia Papp*

COST LIMIT : \$ 550.00

ORDER DATE : July 24, 1998

ORDER TIME : 2:39 PM

ORDER NO. : 903532

CUSTOMER NO: 4390339

CUSTOMER: Ms. Becky Taber
Medpartners, Inc.
3000 Riverchase
Galleria Tower / Ste. 1000
Birmingham, AL 35244

CHANGE OF AGENT

NAME: EMZA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Janice Vanderslice

98 JUL 27 11:14:09
FBI - BIRMINGHAM