

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000052855 (2)

1. Corporation Name

MEDSTAR, INC.



Principal Place of Business

8903 GLADES ROAD
STE. L9-251
BOCA RATON FL 33434
US

Mailing Address

8903 GLADES ROAD
STE. L9-251
BOCA RATON FL 33434
US

2. Principal Place of Business

2a. Mailing Address

21 10704 Avenida Santa Ana
Suite, Apt. #, etc.

26 10704 Avenida Santa Ana
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Boca Raton, FL

28 Boca Raton, FL

24 Zip 33498 Country US

29 Zip 33498 Country US

9. Name and Address of Current Registered Agent

DEUTSCH, STEVEN
888 SE 3RD AVE, STE. 501
FT. LAUDERDALE FL 33335

3. Date Incorporated or Qualified

07/28/1993

3a. Date of Last Report

01/23/1995

4. FEI Number

65-0430542

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

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 607.0532 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 available upon request

Printed Registered Agent signature provided when necessary

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DEUTSCH, STEVEN W
STREET ADDRESS 8903 GLADES ROAD, STE. L9-251
CITY-ST-ZIP BOCA RATON FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

Steven W. Deutsch, Pres

4/15/96 (954) 763-4424

Date

Daytime Phone

CR2E034 (12/95)