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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000058706 (1)
TELCARE CORPORATION

FILED Apr 10 1997 8:00am Secretary of State

7301-A WEST PALEMETTO PARK ROAD 7301-A WEST SUITE 2048				g Address West (Palemetto) Park Road 2048 Paton FL 33433			3. Date Incorporated or Qualified 3a. Date of Last Report				
							08/18/1993			01/1996	
2. Principal Pl 21	ace of Business	2a. Mailing	g Address	otto)	**	4. FEI Number 65-043412	3	— <u>————————————————————————————————————</u>	⊢ +	Applied For Not Applicabl
Suite, Apr. #, etc.		Suite,	Suite, Apt. #, etc.				5 Cartificate of Status Decired S8.75 Ad				
City & State)	City &	State	***************************************			6. Election Camp	aign Financing		\$5.0	0 May Be
23		28		.,			Trust Fund Co	ntribution			d to Fees
Zφ 	Country	Zip		Count	try		8. This corporation				s. 199.032,
24	25 9. Name and Address of Curr	29	\ash	30			Florida Statute 10. Name and Ad			No	
BLICE	I, BOBRA S	ont negistered F	190111		31 Nam	Α	10. Hallo ello Au	(d1000 01 110m	11001010100	Agont	
22119 BOCA PLACE DRIVE STE. 312 BOCA RATON FL 33433				8		50	ss (P.O. Box Numbe LONGBO)	AT L	ANE :	85 75	b Code
11. Pursuant office or re	to the provisions of Sections 607.0	1502 and 607.1508 ate of Florida, Suc	8, Florida Stat th change was			ed corpo orporatio	ration submits this s n's board of directo	statement for th			its registered as registered
11. Pursuant office or reagont. Lat SIGNATURE	to the provisions of Sections 607.0 ogisters of agent, or both, if the Sections for many the sections with, and acceptance to the solutions which or present some of registered. OFFICERS A	1,60	bie. BC		by the co	sust	1. Ites	4/	te purpose copt the ap	of changing pointment a	ORS IN 12
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From the control of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. In further certify that the first of the corporation 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