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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	REPORT Secretary of State DIVISION OF CORPORATIONS								
DOCUM 1. Corporation N	ENT # P93000078 THERAMED RECRUIT		IP. INC.						
	THERAMED REGRET	INDIA OROX	21, 21,00						
Principal Place of Business Mailing Address									
10230 N.W. 47th STREET 10230 N.W. 47th STRE									
	ERDALE, FL.	FT. 3	LAUDERDAL 33351-79		• ملك	3. Date Incorporated or Qualified	3a. Date	of Last Re	port
333:	51-7970		33331 77	, 0		11/08/93	3/	20/95	
2. Principal Plac	ce of Business	2a. Mailin	g Address			4. FEI Number 65-0436846		 	Applied For Not Applicable
21		26 Suito	Suite, Apl. #, etc.					\$8.75	Additional
Suite, Apt. #,	etc.	27				5. Certificate of Status Desired			Required
City & State		⊢	City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees
23	Country	28 Zip		Гс	ountry	8. This corporation has liability for	intangible ta	under s	199.032,
Ζιρ [24]	Country 25	29		30		Florida Statutes Yes 10. Name and Address of New I	★ No		
	9. Name and Address of Cur	rent Registered	Agent		81 Name	10. Name and Address of New F	egiste ou z	gont	
LAFITEAU	, EDWARD P.				1 1	dress (P.O. Box Number is Not Accepta	ole)		
739 SAND CREEK CIRCLE						oress (F.O. Clox Morrison to visco Gorph			
FT. LAUDERDALE, FL. 33327									
					84 City		FL	85 Z	p Code
			o Elected Otobuto	o tho	bow named corn	oration submits this statement for the puner of directors. I hereby accept the app		nging its	registered office
11. Pursuant to	o the provisions of Sections 607.0 ed agent, or both, in the State of I	1502 and 607.150 Florida, Such char	ge was authorize	ed by the	ne corporation's bo	oration submits this statement for the public pard of directors. I hereby accept the app	cointment as	registered	agent. I am
familiar with	h, and accept the obligations of	Section 607.0505,	Florida Statutes	•			4/2	2/96	_
SIGNATURE _	Signa; indityped or printed name of registered				ered Agent signature reux	iked when reinstating) ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	ORS IN 12
12.	OFFICERS	AND DIRECTOR	S DELETE		3.	Abbinonoio		Change	☐ Addition
TITLE			Decert	- 1	,2 NAME				ŀ
1	BEVINE, DAVID				3 STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	705 SAND CREEK CI FT. LAUDERDALE, F	RCLE			.4 CITY - ST- ZIP			Change	Addition
TITLE	r. 1 . HAUDERDANES I	11-33321-	DELETE	~ 2	1 TITLE				
NAME	LAFITEAU, EDWARD	P.			2 NAME				
STREET ADDRESS	739 SAND CREEK CI	RCLE			2 3 STREET ADDRESS 2 4 City - St - Zip				
CHY-ST-7IP	FT. LAUDERDALE, F	L. 33327	DELETE		3 1 TITLE			Change	Addition
TITLE NAME						LEVINE, SHARI L.			
STREET ADDRESS						705 SAND CREEK CIRCLE			
City-ST-ZIP						FT. LAUDERDALE, FL.	13327	Change	Addition
TITLE			DELETE		4. 1 TITLE 4.2 NAME			_	
NAME				1	4.2 NAME 4.3 STREET ADDRESS				
STREET ADDRESS				I	4.4 CITY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·		
CITY-SI-7IP TITLE		·	☐ DELETE		5 1 TITLE	-04/30/960	#U_1_U 1052	r i diada A fin	e 🔲 Addition
NAME				ı	52 NAME	***200.00	100%	טוט	
STREET ADDRESS				j	5 3 STREET ADDRESS				
CHTY-ST-ZIP			רין הנוכינ		5.4 CITY-ST-ZIP			Chang	e Addition
TITLE			DEFELE		62 NAME			>	V120
NAMÉ				1	6 3 STREET ADDRESS				47
STREET ADDRESS					6.4 CITY - ST-ZIP	I'll fauthe exemption stated in Section 1	10.07/99/6	Harida Sta	atutes I further

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 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 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 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 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 under under 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 under under 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 under under 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 under under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if under under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if under under the same legal effect as if under under under under under under u