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

CORPORATION ANNUAL REPORT



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

1996

DOCUN 1. Corporation									
MEDITEK CAPITAL CORP.									
Principal Place	of Business	Mailing Address				IIA BBAII BBIII bib b		1840 41 00% 8011 4 0 08	
825 S.BAYSHORE DR SUITE 1650 MIAMI FL 33131		825 S.BAYSHORE DF SUITE 1650 MIAMI FL 33131	3						
					 Date Incorporated or Qualified 05/31/1994 	3a. Date of 05	Last Re /01/1 9		
		2a. Mailing Address			4. FEI Number	<u> </u>	L-+-	Applied For	_]
21 26 Suite, Apt. #, etc.		26			59-3258434 Not Applicat 5 Codificate of Status Decised S8.75 Additional			Not Applicable	
22 27		en en a			5. Certificate of Status Desired			Additional Required	
City & State		City & State			6. Election Campaign Financing		•	0 May Be	-
		28	Zıp Cour		Trast rano contribution		Added to Fees		4
Zip 24	—————————————————————————————————————		30	шу	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes \(\frac{\frac{1}{3}}{2} \) Yo				
	9. Name and Address of Current				10. Name and Address of New R		ent		
				81 Name					
MENDELSON, VICTOR H				82 Street	Address (P.O. Box Number is Not Acceptab	le)			1
	AFT ST			83	The same of the property of the same of th				-
HULLT	WOOD FL 33021				X - 3 - 4 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7				_
				84 City		FL ^{is}	8 5 Zip	o Code	
or registere	o the provisions of Sections 607.0502 a ad agent, or both, in the State of Florida n, and accept the obligations of, Sectio	 Such change was authorized 	ed by the c	ve-named co orporation's	proporation submits this statement for the pur board of directors. I hereby accept the appo	pose of changi pintment as reg	ng its r jistered	egistered office agent. Lam	,
SIGNATURE	,,,								
	grature, typed or printed name of registered agent and too Tappicable (NOTE' B) OFFICERS AND DIRECTORS		TL: Registered	Agent signature r	itied when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				_ જો⊢
12.	DVT	DELETE 1.1		11 F	DTV		Change	Addition	CR2E034 (12/95)
NAME	IRWIN, THOMAS S	1.2) , v	y .			4
STREET ADORESS	3000 TAFT ST	135		REET ADDRESS					
CITY - ST - ZIP	HOLLYWOOD FL 33021			TY+ST+ZIP					
TITLE	DC	- · · · · · · · · · · · · · · · · · · ·		TLE			Change	Addition	10
NAME			22 N/						
STREET ADDRESS	825 S.BAYSHORE DR #1650)		HEET ADDRESS					
CITY-ST-ZIP TITLE	MIAMI FL 33131 DP [] DELETE		24 C) 3 1 T	TLE			Change	Addition	\dashv
NAME	PAUL JOSEPH					LJ (ιαπ <u>y</u> σ	☐ Addition	
STREET ADDRESS	825 S.BAYSHORE DR #1656)		TREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33131	-		TY-ST-ZIP					
TITLE	DV	DELETE 4.1					Change	Addition	-
NAME	MENDELSON, VICTOR	· ·		ME	8000018				
STREET ADDRESS			4.3 STREET ADDRESS		-05/28/96010	J22038	l		
CITY-ST-ZIP	MIAMI FL 33131	F) NEIER		TY-ST-ZIP	***4800 . 00		^hon	T Addison	_
TITLE	\$ VETTED IUNITH					LJ (Change	Addition	
NAME VETTER, JUDITH STREEI ADDRESS 825 S.BAYSHORE DR #1650		n	5.2 NAME 5.3 STREET ADDRESS 5.4 City-St-Zip						
CHY-ST-ZIP	MIAMI FL 33131								
TITLE		DELETE 6.1			D		Cnange	Addition M	_
NAME :			6.2 N/		mendelson Eric		•	$\mathcal{L}_{\mathcal{L}}$	•
STREET ADDRESS			6381	REET ADDRESS	3000 Talt Street	_		22	,
CITY-ST-ZIP			6 4 CI	1Y-S1-ZIF	Hollywood, 72 3	33021		17.	

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

(34) 374-1745