## 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

## **FILED** Feb 25 1998 8:00am Secretary of State

•	MENT # P94000 MED ACTION, INC.	0049948 (0)			
Principal Plac	e of Business	Mailing Address		T I DEICHEN (IN DECH ANDIS ANDIS ANDIS ANDIS ANDIS ANDIS ANDIS AND SECTION OF	14010 18110 18111 BIDBI <del>181</del> 1 1881
7930 NW 36 ST., #23-426 7930 NW 36 ST., #23-426					
MIAMI FL 33166 MIAMI FL 33166				DO NOT WRITE IN THI	C CDACE
				3. Date Incorporated or Qualified	5 SPACE
				06/27/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26			65-0503095	Not Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
27				J. Dormond of challed beamed	Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>Zip</b>	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	<ol> <li>This corporation owes or has paid the or Personal Property Tax due June 30.</li> </ol>	Yes No
24	9. Name and Address of Curren		1301	10. Name and Address of New Registere	
, HE	RNANDEZ, CRUZ E		81 Name		
7930 NW 36 ST., #23-426 MIAMI FL 33166		82 Street Add	tress (P.O. Box Number is Not Acceptable)		
			83		
			84 City	***	85 Zip Code
				F	<del>-</del>
office or r agent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.05 <mark>05,</mark> Fl	es, the above-named cor authorized by the corpora orida Statutes.	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	opointment as registered
SIGNATURE				uired when reinstating) DATE	
12.	Signature, typed or printed name of registered age OFFICERS AND		E: Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HERNANDEZ, CRUZ H		1.2 NAME		
STREET ADDRESS	7930 NW 36 ST., #23-426		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33166		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELET <b>E</b>	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE		□ bettit	3.2 NAME		Change Addition
NAME STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY+ST-ZIP		
TITLE		DELE <b>te</b>	4,1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change L Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		•
CITY-ST-ZIP			5.4 City-St-ZIP		
T(T) P		DELETE			Change Addition
TITLE		DELET <b>E</b>	6.1 TITLE		Change Addition
NAME		☐ DELET <b>E</b>	6.1 TITLE 6.2 NAME		Change Addition
		☐ DELETE	6.1 TITLE		Change Addition

or not also accurate and mai my signature shall have the same legal effect as if made under oath; that I am a suppowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a officer or director of the corporation or the receiver of Block 12 or Block 13 if changed,

CRUZ HERNANDEZ

02/17/98