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

DOCUMENT # P94000057223 (7)

MEDICAL MATTERS, INC.

FILED May 27 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address										i nonsinan ina lana ninin anni ansi ansi ansi		18818 11818 11	1000 1111 1901
1112 77TH STREET COURT N.W. SRADENTON FL 34209					1112 77TH STREET COURT N.W. BRADENTON FL 34209					DO NOT WRITE I	N THIS S	PACE	
									7	3. Date incorporated or Qualified 08/01/1994			
2	Principal Pl	ace of Busin	ness	28.	Mailing Address					4. FEI Number		Δ	pplied For
21					26					65-0505429			lot Applicable
-	Suite, Apt. #, etc.				Suite, Apt. #, etc.						_		Additional
22	1				27					Certificate of Status Desired		7	Required
=		City & State			City & State					6. Election Campaign Financing		\$5.00	May Be
23				28	28					Trust Fund Contribution			to Fees
	Zip	Zip Country			Zip Country				1	8. This corporation owes or has paid	the curr	ent year Ir	ntangible
24		25			29 30					Personal Property Tax due June 30. Yes No			
	9, Name and Address of Current Reg				· · · · · · · · · · · · · · · · · · ·					Name and Address of New Reg	istered A	gent	
	PRE	WETT, DA	wiel L					Name	e				
	577	77 BENEVA ROAD					62	Stree	t Address	(P.O. Box Number is Not Acceptable	e)		
	SAF	RASOTA FI	L 34233				83						
	İ						84	City				85 Zip	Code
	:										FL		
11. Pursuant to the provisions of Sections 607.0502 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													
12.		Signature, typical or pented name of registered agent ned title if applicable (NOTE R OFFICERS AND DIRECTORS					togistared Agent aignature require			ADDITIONS/CHANGES TO OFFICE	DATE DC AND	DIDECTO	DC IN 12
	TLE	PVSD	OFFICERS	NI) DINL C	DELETE	1.1 7	ITLE		1	ADDITIONS/CHANGES TO OFFICE	טוא טוו.	Change	Addition
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STREET ADDRESS		CROSS, JOAN A 1112 77TH STREET COURT NV					1.2 NAME 1.3 STREET ADDRESS		,				1
CITY-ST-ZIP		BRADENTON FL 34209						1.4 CITY - ST - ZIP					İ
TITLE		DIVIDLE	11014 1 1 04208		DELETE	2.1 1		1-215			- 1	Change	Addition
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:								2. 4 CITY - ST - ZIP					
CITY-ST-ZIP TITLE								3.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition
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CITY-ST-ZIP		ĺ			·			3.4. CITY-ST-ZIP					
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	REET ADDRESS							address	,				l
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U	TY-ST-ZIP					0.9 0	111-2	1 - TIL	1				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changes in an address.