FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000082949 1. Corporation Name

MEDTX CORPORATION

Fillicipal Flace	e of Business	Maining Address								
555 W GRANAD	A RIVD #A-3	555 W GRANADA BLVD #A-3	555 W GRANADA BLVD #A-3							
ORMOND BEAC		ORMOND BEACH FL 32174								
US		US			L	DO NOT WRITE IN THIS SPACE				
					3	3. Date Inc	corporated or Qualif	ed		
		•			1	11/14/	1994			
2. Principal Pl	lace of Business	2a. Mailing Address			4	. FEI Nun	nber		A	Applied For
21		26				59-328	30284		N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional				
22		27			5	, Certificat	e of Status Desired		Fee F	Required
City & Stat	е	City & State			6	. Election	Campaign Financii		\$5.00	May Be
23		28				Trust Fund Contribution Added to Fees				
Zip Country			Zip Country			. This con	poration owes the	current year Inta	angible	
24	25	29 30	่า		"	Personal Property Tax. XXYes No				
24	9. Name and Address of Current Registered Agent		1		10		nd Address of Ne	w Registered	Agent	
	S. Italia and Addicas of Salisia		8	1 Name	e					
GARTHE, J. STEVEN			L		Palme	tto C	<u>harter Ser</u>	<u>vices, I</u>	nc.	
,	-					ddress (P.O. Box Number is Not Acceptable)				
555 W GRANADA BLVD			8		_150_M	lagnol	<u>ia Avenue</u>			
A3	OND DESCRIPTIONS		°	3						
URM	OND BEACH FL 32174		8	4 City		_			85 Zip	Code
	•		1		Dayto	ona Be	ach	FL	<u>. 3</u>	2115
11. Pursuant	to the provisions of Sections 007 0000 egistered agent er som in the State of m familiar with anglescept the obligati	and 607.1508, Florida Statutes,	the abo	ve-name	d corporation	on submits	this statement for	the purpose of	changing i	ts registered
office or r	registered agent e gottom the sale of	r Florida. Such change was autr ons of, Section 607-0505, Florid	a Statute	yuneco⊪ es.	porations	board or di	recions. I noreby at	copt the appoi		, og.o.o.o
1		Larry	/ D.	Mar	rsh, 1	Vice	President	4/22,	/99	}
SIGNATURE	Agnature sport or priviled prime of registered agent	and little if applicable. (NOTE: Re	gistered Ag	ent signature	e required wher	n reinstating)		DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIO	NS/CHANGES TO	OFFICERS AN		
TITLE	PD	☐ DELETE	1.1 TITLE	•	1				Change	e 🗌 Addition
NAME	HAYES, RONALD E		1.2 NAME	E						1
STREET ADDRESS	555 W GRANDADA BLVD, A3		1.3 STRE	ET ADDRES	is					į
CITY-ST-ZIP	ORMOND BEACH FL		1.4 CITY	-ST-7IP						
TITLE	SVP	XXDELETE	2.1 TITLE						☐ Change	Addition
NAME	1 * ' '		2.2 NAM	F						
	GARTHE, J. STEVEN			ET ADDRES	<u>,</u>					}
STREET ADDRESS	55 II GININDA BEID, AG				~]					}
CITY-ST-ZIP	OTHER DESIGNATION OF THE PROPERTY OF THE PROPE		2.4 CITY		-	_			Change	Addition
TITLE	SVPD	[] DELETE	3.1 TITLE	_					□ origing.	
NAME	FERGUSON; DENNIS J	•	3.2 NAMI					-		
STREET ADDRESS	555 W GRANADA BLVD, A3		3.3 STRE	ET ADDRES	is					ļ
CITY-ST-ZIP	ORMOND BEACH FL		•	·ST-ZIP		_				_ □ Audito :
TITLE	VP	☐ DELETE	4.1 TITLE	Ē					Chang	e Addition
NAME .	FERGUSON, DEBORAH		4, 2 NAM	Æ						ļ
STREET ADDRESS	555 W GRANANDA BLVD, A3		4.3 STRE	EET ADORES	ss					
CITY-ST-ZIP	ORMOND BEACH FL		4.4 CITY	-ST-ZIP						
TITLE	VPTD	☐ DELETE	5.1 TITLE		מעד		·		XX Chang	e 🔲 Addition
NAME	··· ·=		5.2 NAM	E	VP/	nnartz	, Joseph V			
	LENNARTZ, JOSEPH V		5.3 STRE	EET ADDRES			ranada Bly			
STREET ADDRESS	, 000 11 011111111111111111111111111111		5.4 CITY				each, FL			
CITY-ST-ZIP	ORMOND BEACH FL		6.1 TITLE			пола в	еасп, вы	JZ1/4	Chang	e Addition
TITLE	1	☐ pereie	6.2 NAM		ļ					
NAME				E EET ADDRES						
PATRICET ADDRESS			■ 6.3 S (RE	ELI AUUKES	30					

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90064 034 ***150.00



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 changed, or on an anachment with an anachme

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99