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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 02 1998 8:00am

Secretary of State

Change

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000022895 (3)

FIRST MEDICAL, INC

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Mailing Address Principal Place of Business 1106 ERMINE AVE 1106 ERMINE AVE WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/22/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-33 16999 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country 8. This corporation owes or has paid the current year Intangible Zip Country Yes □Ño 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GARRETT, WILLIAM S 1106 ERMINE AVE Street Address (P.Q. Box Number is Not Acceptable) WINTER SPRINGS FL 32708 83 Zip Code 84 City 85 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS DELETE Change Addition 11 TITLE TIRE GARRETT, WILLIAM S 1.2 NAME **72E034** 1106 ERMINE AVE 1.3 STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL 32708 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE GARRETT, CHRISTINA S 2.2 NAME NAME 1106 ERMINE AVE 2.3 STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL 32708 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 31 TELF TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

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 triffstee directors 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 under oddress.

SIGNATURE:

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE