

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

FILED

Mar 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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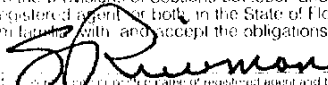
DOCUMENT # **PA6000025697**
1. Corporation Name
SR HEALTH MANAGEMENT, INC.

Principal Place of Business Mailing Address
1041 IVES DAIRY RD. #139
MIAMI FL 33179

2. Principal Place of Business 21 5137 S. UNIVERSITY Street, Apt. #, etc.		2a. Mailing Address 26 1501 N.W. 92 AVE. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 4-11-95	3a. Date of Last Report 7-31-96
22 City & State 23 DAVIE, FL		27 City & State 28 PLANTATION FL		4. FEI Number 65-0581516	Applied For ☐ Not Applicable
24 Zip 33328		29 Country BROW		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
25 Zip 33322		30 Country BROW		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
26		27		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

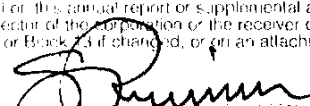
9. Name and Address of Current Registered Agent BERNARD SINGER 4700 B SHERIDAN ST. HOLLYWOOD FL 33021				10. Name and Address of New Registered Agent 81 Name STEVEN RIEVMAN 82 Street Address (P.O. Box Number is Not Acceptable) 1501 NW 92 AVE. 83 84 City PLANTATION FL 85 Zip Code 33322			
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11. 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 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:  DATE: **3-20-97**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	P STEVEN RIEVMAN	1501 N.W. 92 AVE.	PLANTATION FL 33322	☐ Change ☐ Addition			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	VP ALAN DURETZ	1041 IVES DAIRY RD	MIAMI FL 33179	☐ Change ☐ Addition			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	S/T DEBORAH RIEVMAN	1501 NW 92 AVE	PLANTATION FL 33322	☐ Change ☐ Addition			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
				☐ Change ☐ Addition			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
				☐ Change ☐ Addition			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
				☐ Change ☐ Addition			

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 included 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:  **S. RIEVMAN** DATE: **3/20/97** DAYTIME PHONE: **(954) 963 3650**

CR2E034 (9/96)