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

PROFIT CORPORATION ANNUAL REPORT

1997

CHY-S1-ZIE

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000029507 (7)

DANATECH MEDICAL SYSTEMS CORP.

Principal Place of Business Mailing Address 6927 NW 82ND AVE. 6927 NW 82ND AVE. MIAMI FL 33166 MIAMI FL 33166-2766 3. Date Incorporated or Qualified 3a. Date of Last Report 04/14/1995 04/30/1996 2. Principal Place of Business 21 3801 5 Ocean 4. FEI Number 28. Mailing Address Applied For 3801 Ocean Dr 26 65-0572767 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 14 145 Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be Hollywood Florida Trust Fund Contribution 28 Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, USA Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CARDONA, SANTIAGO Guevara Street Address (P.O. Box Number is Not Acceptable) 14658 S.W. 128 CT RD 82 MIAMI FL 33186 В3 84 330/9 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 igent, or highly limit he State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamilish with, any legislations of, Section 607.0505, Florida Statutes. Luis F. Guevara SIGNATURE guired when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TOTLE PTO 1.1 TITLE GUEVARA, LUIS GUEVARA, LUIS F NAME 12 NAME # 145 3801 S. OCEAN D12. **6927 NW 82 AVENUE** 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL MIAMI FL 1.4 CITY-ST-ZIP City - ST - ZiP DELETE Change Addition 1171.6 2.1 TITLE CARDONA, CANTIAGO NAME 2.2 NAME COAT ANY COND AVEN STREET ADDRESS 2.3 STREET ADDRESS MIAMILEI. 2. 4 CITY-ST-ZIP  $C \cdot I \, Y \cdot S^1 \cdot Z \cdot P$ DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition THEF 4.1 TOTLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHY-\$1-20 DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP C+TY+\$1+7/P TITLE .... DELETE 6.1 TITLE ☐ Change Addition NAVS 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CiTY-ST-ZiP

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplyemental annual report is strugged 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 employees 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 appears.

SIGNING OFFICER OF DIRECTOR