

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000036817 (1)

1. Corporation Name

ADVANCED CASE MANAGEMENT, INC.



Principal Place of Business

Mailing Address

2300 GLADES ROAD
SUITE 155W
BOCA RATON FL 33431

2300 GLADES ROAD
SUITE 155W
BOCA RATON FL 33431

3. Date Incorporated or Qualified
05/05/1995

3a. Date of Last Report

2. Principal Place of Business

21 3445 NW 55 ST.

2a. Mailing Address

26 3445 NW 55 ST.

4. FEI Number

65-0582018

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

22 City & State

23 FT. LAUDERDALE, FL

27 City & State

28 FT. LAUDERDALE, FL

24 Zip

33309

25 Country

USA

29 Zip

33309

30 Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUCKMAN, ELCHA S
2300 GLADES ROAD
SUITE 155W
BOCA RATON FL 33431

81 Name BUCKMAN, ELCHA S.

82 Street Address (P.O. Box Number is Not Acceptable)
3445 NW 55 STREET

83

84 City FT. LAUDERDALE

FL

85 Zip Code

33309

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: *Elcha S. Buckman*

(NOTE: Registered Agent signature required when reinstating)

DATE

4-20-96

12. OFFICERS AND DIRECTORS

TITLE ELCHA S BUCKMAN ☐ DELETE
NAME PRESIDENT
STREET ADDRESS 3445 NW 55 STREET
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE: *Elcha S. Buckman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/95 305
485-5303
Day Phone #

CR2E034 (12/95)