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FILED
May 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000042837 (1)

1. Corporation Name
BEACON HEALTHCARE GROUP, INC.



Principal Place of Business

2700 N. 29TH AVENUE
HOLLYWOOD FL 33020
US

Mailing Address

2700 N. 29TH AVENUE
HOLLYWOOD FL 33020-1520
US

2. Principal Place of Business

21 2700 N. 29th Ave

22 Suite 208

23 Hollywood, FL

24 33020-1520

2a. Mailing Address

26 2700 N. 29th Ave

27 Suite 308

28 Hollywood, FL

29 33020-1520

3. Date Incorporated or Qualified
06/01/1995

3a. Date of Last Report
08/12/1996

4. FEI Number
65-0585626

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

SINGER, BERNARD A ESQ.
4700 SHERIDAN STREET
SUITE B
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD

NAME THORNE, ROBERT
STREET ADDRESS 2700 N. 29TH AVENUE
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE VPD

NAME KEENAN, BRUCE
STREET ADDRESS 2700 N. 29TH AVENUE
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE VPD

NAME BAJOS, ORLANDO
STREET ADDRESS 2700 N. 29TH AVENUE
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE ST

NAME THORNE, BEATRIZ
STREET ADDRESS 2700 N. 29TH AVENUE
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 attachment with an address.

SIGNATURE

CR2E034 (9/96)