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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1997 8:00am

Secretary of State

96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000043972 (5)

ASIA MEDICAL CENTER INC.

7500 SE 8 ST 7500 SE 8 ST SUITE 207 SUITE 207 MIAMI FL 33144 MIAMI FL 33144-4400 3. Date Incorporated or Qualified 3a. Date of Last Report 05/30/1995 06/02/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0353518 7821 CORAL WAY 26 SAME Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired xx Fee Required SUITE 132 27 SAME 8. Election Campaign Financing \$5.00 May Be MIAMI, FIORIDA Country SAME 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 25 U.S. 30 U.S. Florida Statutes ☐ Yes ☐ No 29 SAME 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 GARRIDO, CARLOS M JR. 7500 SW 8 ST Street Address (P.O. Box Number is Not Acceptable) #207 MIAMI FL 33144 83 84 City 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

Structure for 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 agent for the purpose of changing its r DATE (NOTE flegistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE 1.1 TITLE Change THILE GARRIDO, CARLOS M NAME 1.2 NAME 7500 SW 8 ST, #207 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33144** 1.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Addition 2.1 TITLE Change TITLE MORALES, TERESA 2.2 NAME 7500 SW 8 ST. #207 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33175 CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TUTLE GARRIDO-DUERO, ANA M 3.2 NAME 7500 SW 8 ST. #207 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33175 3.4. CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-\$1-ZIP DELETE Addition 6.1 TITLE THEF 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADORESS

6.4 CITY-ST-ZIP

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.

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

Carlots Mi