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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000057760 (7)

CONMEDR, INC.

Principal Piac	e of Business	Mailing Address				C TO RESOURT SEED TOTALD SOUTH ABOUT ORDER ORDER			81111 <b>20</b> 44 1081	
11100 SW 84 COURT 11100 SW 84 COURT MIAMI FL 33156 MIAMI FL 33156-4311										
						3. Date Incorporated or Qualified 07/26/1995 3a. Date of Last Report 06/04/1996				
2. Principal P	lane of Business	2a. Mailing Address	······································			4. FEI Number	-1		Applied Fo	
[1]		26				65-0602930			Not Applic	
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additiona Required	
City & Stat	e	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Ζφ (4	Country 25	Zip 29	Cour 30	ntry		This corporation has liability for Florida Statutes	injangible Yes [		er s. 199.032	
.ik	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
RIC	E, AUDREY			81	Name					
11100 SW 84 COURT MIAMI FL 33156			<u>}</u>	82	Street Address (P.O. Box Number is Not Acceptable)					
WILL	MI FL 90190		į.	В3			<del></del> -		<del></del>	
			Ţ	84	City		FL	85 Z	ip Code	
11. Pursuant office or r agent 1 a	lo frie provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida State of Florida. Such change willigations of, Section 607.0505	tatutes, the ab vas authorized 5, Florida Statu	ove by les	named corp the corporal	oration submits this statement for the pion's board of directors. I hereby acce	ourpose of pt the appo	changin pintment	g its register as register	
SIGNATURE	South typed a percentant of registends	agent and title if angiousble	(NOTE: Registered	Age	ent signature requir	ed when reinstating)	DATE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		DIRECT	ORS IN 12	
T-DLE	D	☐ DELETE	1.1 ไปไ	LE				Chan	je Add	
NAME	RICE, THOMAS J		1.2 NAI	ME	- 1					
STREET ACCURESS	11100 SW 84 COURT			1.3 STREET ADDRESS						
CITY ST-ZIP	MIAMI FL 33156		1.4 CIT	Y-5	IT-ZIP					
TITLE	D	DELETE	2.1 TIT	LE				Chan	ge Add	
NAME	RICE, AUDREY		2 2 NA	ME	- 1					
SIREEL ADORESS	11100 SW 84 COURT		2.3 STF	REET	ADDRESS					
CITY-51 20	MIAMI FL 33156		2. 4 CI	TY - 9	ST-ZIP					
Tift{		DELETE	3.1 717	LE				Chan	ge 🔲 Add	
NAME			3.2 NAI	ME						
STRUET ADDRESS			3.3 STF	REET	ADDRESS	·				
CITY-ST ZIP			3 4. Ci	1 <b>Y</b> - 5	ST-21P					
THEF		DELETE	4.1 TIT	LE				Chan	ge 🔲 Adı	

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 of 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 economy or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block. 12 or jock 13 if changed, or unique analysis.

4 2 NAME

5.1 TITLE 5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

4.3 STREET ADDRESS

5 3 STREET ADDRESS 5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

NAME

1011

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

(III Y - \$1 - 76)

Offr-ST-ZP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

Homas J. Ricz 4-4-92 85545-53

**FILED** 

Apr 18 1997 8:00am

Secretary of State

M213042

Change

Change

Addition

Addition