PROFIT CORPORATION ANNUAL REPORE 1996	(人名) 伊人 ( ) 3 2	Sand Sec	PARTMENT OF STATE fra B Mortham retary of State OF CORPORATIONS		
DOCUMENT # 1. Corporation Name  OES MEDICAL S	1 93000	0062133 (	0)		
Principal Place of Business		Mailing Address			
7172 N.W. 12TH STREET MIAMI FL 33126		7172 N.W. 12TH ST MIAMI FL 33126	REET		
Principal Place of Busines	e e			Date Incorporated or Qualified     08/09/1995	3a. Date of Last Report
Suite, Apt #, etc		2a. Mailing Address 26 Suite, Apt #, etc	7	4. FEI Number 65 - 0608514	Applied For Not Applicab
City & State		27 City & State		5. Certificate of Status Desiri, d	\$8.75 Additional Fee Required
Zip	Country	28 Zip	Condo	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25	ì ´	29	Country 30	8. This corporation has liability for Florida Statutes	Yes No
SILVERMAN, RI			81 Name	10. Name and Address of New F	iegistoren Agent
7172 N.W. 12TI MIAMI FL 3312	1 STREET		82 Street Ad	dress (PO Box Number is Not Accepta	
7172 N.W. 12TI MIAMI FL 33120	i street 3		82 Street Ad 83 84 City	dress (PO-Box Number is Not Accepte	ible)
7172 N.W. 12TI MIAMI FL 33120  . Pursuant to the provision office or registered agent agent. Lam tamiliar with, GNATURE	of Sections 607 (1502 a	ind tille if applicatio (	82 Street Ad 83 84 City tutes the above named cols authorized by the corpora Floridal Statutes	dress (PO Box Number is Not Accepts  rporation submits this statement for the latence of directors. Thereby accept  ared when remaking)	FL 85 Zip Code purpose of changing its registered the appointment as registered
7172 N.W. 12TI MIAMI FL 33120  . Pursuant to the provisions office or registered agent agent I am familiar with agent Tam familiar with agent Signature typed or p	s of Sections 607 0502 a or both, in the State of and accept the obligation of the original agent and officers and comment of registered agent and OFFICERS AND E	ind tille if applicatio (	82 Street Ad 83 84 City tutes, the above named cols authorized by the corpora Florida Statutes NOTE Registered Agent signature req 13.	dress (PO Box Number is Not Accepta rporation submits this statement for the lation's board of directors. Thereby accep	FL 85 Zip Code pulpose of changing its registered of the appointment as registered  Date  CERS AND DIRECTORS IN 12
7172 N.W. 12TI MIAMI FL 33126  Pursuant to the provision office or registered agent agent I am familiar with, a GNATURE  Signature fixed or p  LE D  SILVERMA  7172 N.W	of Sections 607.0502 a or both, in the State of and accept the obligation of FICERS AND ENAMED ASSELL.	and sile if applicatio (	82 Street Ad 83 84 City tutes, the above named coils authorized by the corpora Florida Statutes  NOTE Registered Agent signature red 13. 11 TITLE 12 NAME 13 STREET ADDRESS	dress (PO Box Number is Not Accepts  rporation submits this statement for the latence of directors. Thereby accept  ared when remaking)	FL 85 Zip Code pulpose of changir g its registered the appointment as registered  Date  CERS AND DIRECTORS IN 12
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7172 N.W. 12TI MIAMI FL 33120  Pursuant to the provisions office or registered agent agent I am familiar with, a SINATURE  Signature speed or p  E. D. SILVERMA  7172 N.W. Y-SI-ZIP MIAMI FL  E. AE	of Sections 607.0502 a or both, in the State of and accept the obligation of FICERS AND ENAMED ASSELL.	installed applicatio () DIRECTORS DELETE	82 Street Ad 83  84 City  tutes, the above named corsonal sauthorized by the corporal Florida Statutes  NOTE Registered Agent signature red 13.  11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST ZIP	dress (PO Box Number is Not Accepts  rporation submits this statement for the latence of directors. Thereby accept  ared when remaking)	FL   85   Zip Code  pulpose of changing its registered  of the appointment as registered  bat:  ICERS AND DIRECTORS IN 12  Charge Adding
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7172 N.W. 12TI MIAMI FL 33120  . Pursuant to the provisions office or registered agent agent I am familiar with.  GNATURE  Signature typed or p.   BY ONE SILVERMATICE ADDRESS (172 N.W. MIAMI FL.)   ME  ME  ME  ME  ME  ME  ME  ME  M	of Sections 607.0502 a or both, in the State of and accept the obligation of FICERS AND ENAMED ASSELL.	DIRECTORS DELETE DELETE DELETE DELETE	82 Street Ad  83  84 City  tutes, the above named corsions authorized by the corporal Florida Statutes  NOTE Registered Agent signature red  13.  11 fillE 12 NAME 13 STREET ADDRESS 14 City-ST-ZIP 21 Title 22 NAME 23 STREET ADDRESS 24 City-ST-ZIP 31 Title 32 NAME 33 STREET ADDRESS 34 City-ST-ZIP 41 Title 4 2 NAME 43 STREET ADDRESS 34 City-ST-ZIP 41 Title 4 2 NAME 43 STREET ADDRESS 34 City-ST-ZIP 51 Title 52 NAME	dress (PO Box Number is Not Accepts  rporation submits this statement for the latence of directors. Thereby accept  ared when remaking)	FL 85 Zip Code  Duipose of Changing its registered  Date  Date  Clear AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
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