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 # P95000075256 (4)

1. Corporation Name

STAT MEDICAL CLINIC V, INC.

Principal Place of Business
% MARSHALL J. EMAS
100 NORTHEAST THIRD AVENUE, SUITE 1100
FORT LAUDERDALE FL 33301

Mailing Address
% MARSHALL J. EMAS
100 NORTHEAST THIRD AVENUE, SUITE 1100
FORT LAUDERDALE FL 33301

3. Date Incorporated or Qualified: 09/29/1995
3a. Date of Last Report:
4. FEI Number: 65-0623978 — [ ] 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

2. Principal Place of Business
21 12302 NE 6 AVE
Suite, Apt #, etc.
22
City & State
23 NORTH MIAMI, FL
Zip 24 33161 Country 25 USA

2a. Mailing Address
26
Suite, Apt #, etc.
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**

EMO CORPORATE SERVICES INC.
100 NORTHEAT THIRD AVENUE
SUITE 1100
FORT LAUDERDALE FL 33301

10. **Name and Address of New Registered Agent**

81 Name: ANDRE STACHEWITSCH
82 Street Address (P.O. Box Number is Not Acceptable): 12302 NE 6 AVE
83
84 City: N MIAMI FL 85 Zip Code: 33161

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 x [signature] ANDRE STACHEWITSCH x 3/21/96

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title	Name	Street Address	City-St-Zip	Change	Addition
PD	ANDRE STACHEWITSCH	12302 NE 6 AVE	N MIAMI, FL 33161	[X]	[ ]
VP	DON FRIDEWALD	12302 NE 6 AVE	N MIAMI, FL 33161	[X]	[ ]
VP	GRETA FRIEDMAN	13144 PARK BLVD STE. B	SEMINOLE, FL 34646	[X]	[ ]
S	MONIQUE STACHEWITSCH	12302 NE 6 AVE	NORTH MIAMI, FL 33161	[X]	[ ]
T	MARC STACHEWITSCH	12302 NE 6 AVE	NORTH MIAMI, FL 33161	[X]	[ ]
				[ ]	[ ]

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14. I do hereby certify that the information supplied with this filing is voluntary, 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: [signature] 1/25/96 (305) 893-7648

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDRE STACHEWITSCH VICE-PRESIDENT

CR2E034 (12/95)

pm 3-26-1996