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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 14 1998 8:00am

Secretary of State

DOCUMENT # P95000077116 (8)

UNIVERSAL ENDOSCOPIC SERVICES, INC.

	Principal Place of Business Mailing Address						
	3200 SW 126	ITH \$T REET	13200 SW 128T	H STREET			
	IUITE F4 NAMI FL 3311	96	SUITE F4 Miami Fl 33186	SUITE F4			DO NOT WRITE IN THIS SPACE
•	INMITE OUT	••	MIMMI IL USIOC	MIAMI FL 33100			3. Date Incorporated or Qualified
İ							10/09/1995
2.	Principal P	lace of Business	2a. Mailing Add	ress			4. FEI Number Applied For
21			26				59-3349269 Not Applicable
_	Suite, Apt.	#, etc.	Suite, Apt. #	, etc.			SR 75 Additional
22			27				5. Certificate of Status Desired Fee Regulred
	City & State City & State						6. Election Campaign Financing \$5.00 May Be
23			28	28			Trust Fund Contribution Added to Fees
L	Zip	Country Zip Cou			untry		8. This corporation owes or has paid the current year Intangible
24		25	29	· +·			Personal Property Tax due June 30. 🔲 Yes 📈 🕏 🗀 Yes
		9. Name and Address of C	urrent Registered Agent			г -	10. Name and Address of New Registered Agent
		DISON, JAMES R			81	Name	
6050 SW 127TH COURT					82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
MIAN		MI FL 33183			-		
					83		
					84	City	85 Zip Code
					Щ	L	FL S 2 FL S 2 FL S FL
יי	office or r	to the provisions of Sections but egistered agent, or both, in the	7.0502 and 607.1508, Flori State of Florida. Such char	i ca Statutes, the a nge was authorize	.bove	≯named co / the corpor	orporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpositive 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							colo las
SIGNATURE Signature of Action product name of registered agent and title if approachis. (NOTL Hegistered Agent signature required when reinstating) DATE DATE							7/76/97
12			S AND DIRECTORS	13.	o Age	TII SIGNAICHE FEG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIT		PTD		ELETE 1.1 TI	ITLE		☐ Change ☐ Addition
NA.	AME MADISON, JAMES			1.2 N	1.2 NAME		
STI	REET ADDRESS	6050 SW 127TH COURT		1.3 S	TREET	ADDRESS	
CIT	ITY-ST-ZIP MIAMI FL 33183			1.4 C	1.4 City - St - ZiP		
TIT			□ D	ELETÉ 2.1 T			Change Addition
NA	WE			2.2 N	AME		·
STI	REET ADDRESS			2.3 \$	TREET	ADDRESS	
CIT	TY-ST-ZIP			2.40	CITY - S	ST-ZIP	
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ĊſŢ	Y-ST-ZIP				ITY-S	ST-ZIP	
TIT	LE		Q 🗀	ELETE 4.1 TO	11LE		Change Addition
NA	ME			4. 2 N	AME		
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!	ME			5,2 N			
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	Y-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		ITY-S	T - ZIP	
TIT				i			☐ Change ☐ Addition
	ME			6.2 N			
STI	R eet addr ess			6.3 S	TREET	ADDRESS	

14. I 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.