


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0049791

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

FILED
 99 JAN -8 AM 9: 57
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # P96000008622 (8)
 1. Corporation Name
HEALTH SUPPORT, INC.

Principal Place of Business 1414 NW 107TH AVENUE #205 MIAMI FL 33172	Mailing Address 1414 NW 107TH AVENUE #205 MIAMI FL 33172
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/26/1996	
21	22	26	27	4. FEI Number 65-0638959	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	25	29	30	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
SERRANO, MARCELLA
 1414 NW 107TH AVENUE
 #205
 MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name	Marcelo Serrano
82 Street Address (P.O. Box Number is Not Acceptable)	1414 NW 107 ave
83	Suite 205
84 City	Miami
85 Zip Code	FL 33172

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: *Marcelo Serrano* DATE: **7-10-98.**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SERRANO, MARCELO	1.2 NAME	
STREET ADDRESS	ONE GROVE ISLE DRIVE, SUITE A-1707	1.3 STREET ADDRESS	800002740628-1
CITY-ST-ZIP	MIAMI FL 33133	1.4 CITY-ST-ZIP	01/13/99 01102 011
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	***750.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SERRANO, ALBA	2.2 NAME	
STREET ADDRESS	17820 SW 200TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33178	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	REINSTATEMENT <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERMOSA, HUGO	3.2 NAME	
STREET ADDRESS	CASO 8945	3.3 STREET ADDRESS	
CITY-ST-ZIP	GUAYAQUIL ECUADOR	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f), 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: *Marcelo Serrano* DATE: **7-10-98** **477-7323**

CR2E034 (5/98)