

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthum Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000043989
 1. Corporation Name
Medtexx Partners, Inc.

Principal Place of Business Mailing Address
2295 Corporate Boulevard, N.W.
Suite 131
Boca Raton, Florida 33431

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
May 23, 1996

2. Principal Place of Business 21 2295 Corporate Blvd. N.W. Suite, Apt. #, etc. 22 Suite 131 City & State 23 Boca Raton, FL Zip 24 33431	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 USA	4. FEI Number 65-0673509 Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent
Gary N. Gerson
1645 Palm Beach Lakes Boulevard
Suite 1200
West Palm Beach, FL 33401

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____ DATE _____
Signature, typed or printed name of registered agent (and fee if applicable) (NOTE: Registered Agent Signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE Bok Tek, Low	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Bok Tek, Low		1.2 NAME	
STREET ADDRESS P. O. Box 9, 34600 Kamunting		1.3 STREET ADDRESS	
CITY-ST-ZIP Taiping, Malaysia		1.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE Low, P.T. S.P. L&P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME Low, P.T. S.P. L&P		2.2 NAME	
STREET ADDRESS P.O. Box 9, Perak		2.3 STREET ADDRESS	
CITY-ST-ZIP 34600 Kamunting		2.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE Panéz Ahmad, Malik	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Panéz Ahmad, Malik		3.2 NAME	
STREET ADDRESS 2295 Corporate Blvd., Suite 131		3.3 STREET ADDRESS	
CITY-ST-ZIP Boca Raton, FL 33431		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)(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

CP2E034 (10/97)