## 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

## DOCUMENT # P96000045601

KAREN K. SENARENS, R.R.A. HEALTH INFORMATION MAN AGEMENT CONSULTANTS, INC.

Principal Place of Business 2460 SW 105TH TERRACE FORT LAUDERDALE FL 33324 Mailing Address

2460 SW 105TH TERRACE FORT LAUDERDALE FL 33324

## **FILED** Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

						05/29/1996			
2. Principal P	face of Business	2a. Mailing Address				4. FEI Number			
21		26				65-0675531	N	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27				5. Certificate of Status Desired	Fee F	Required	
City & Stat	e	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		to Fees	
Zip	Country	Zip	Co	untry	•	8. This corporation owes or has paid the curr	ent year Ir	ntangible	
24	25 29 30							□ No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
SENARENS, KAREN K				81	Name				
246	SO SW 105TH TERRACE	l-			82 Street Address (P.O. Box Number is Not Acceptable)				
F0	RT LAUDERDALE FL 33324					,			
				83					
				84	City		or Zin	Code	
				54	City	FL	85 Zip	Code	
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	Signature, typed or printed name of registered agent	and title # nontineble (NYT)	F Boolston	4 400	ent signature required	d when reinstating) DATE			
12.	OFFICERS AND		13.	tu Age	ant alguatore required	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	2
TITLE	D OF FIGURE AND			1.1 TITLE		ADDITIONATE INTO OTT TO ENG AND	Change	RS IN 12 SO Addition	ŝ
NAME	SENARENS, KAREN K			AME	1	L. Change		7	=
STREET ADDRESS	2460 SW 105TH TERRACE				ADDOCCO			è	3
	FORT LAUDERDALE FL				ADDRESS			i r	Ų.
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NAME :		- 5444	2.1 N				Onlings	Addition	_
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STREET ADDRESS				2.3 STREET ADDRESS					
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NAME			5.2 NAME		1				
STREET ADDRESS			5.3 STREET		ADDRESS				
€ITY-ST-ZIP			5.4 CITY-		T-ZIP			†	
TITLE		DELETE	6.1 Ti	TLE			Change	☐ Addition	
NAME			6.2 N	AME	ŀ				
STREET ADORESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP				6,4 CITY - ST - ZIP					
14. I hereby c	ertily that the information supplied with	this filling does not qualify fo	r the ex	empt	tion stated in S	Section 119.07(3)(i), Florida Statutes. I further cer	tify that the	e information	
indicated	on this annual report or supplemental	annual report is true and acc	urate an	d the	at my signature	shall have the same legal effect as if made und	der oath; th	at I am an	