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 # P96000053913 (5)

DANIEL MEDICAL, INC.

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							i vatriade ira jaura driir abiri tariri atori edini edini edini idila ilila idila ilila idila ilila idila ilila			
2518 MONTEREY COURT 2518 MONTEREY O				₹						
FT. LAUDERD	DALE FL 33327	FT. LA	FT. LAUDERDALE FL 33327				DO NOT WRITE IN THIS SPACE			
Ĭ							3. Date Incorporated or Qualified	THIS STACE		
							06/24/1996			
2. Principal F	Place of Business	2a. Ma	ling Address	<u> </u>			4. FEI Number	Ann	lied For	
21		26					65-0674790	} + 	Applicable	
Suite, Apl.	#, etc.		Suite, Apt. #, etc.					60.75		
22	4.	27					5. Certificate of Status Desired	Fee Req		
City & Sta	te	City	City & State				6. Election Campaign Financing	\$5.00 M	lav Be	
23		28	28				Trust Fund Contribution	Added to		
Zip	Country	Zip	Zip Coul				8. This corporation owes or has paid th	e current year Intar	ngible	
24	25	29		30			Personal Property Tax due June 30. Yes No			
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
	OLOSCA, RANDALL L				81	Name			ļ	
605 LINCOLN ROAD					82 Street Address (P.O. Box Number is Not Acceptable)					
1	ITE 420									
l Mi	ami Beach Fl 33139				83					
Ì					84	City		85 Zip Co	ode	
				· 				FL		
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, typod or priviled name of registered agent and title if ejiminable (NOTE Registered Agent signature required when reinstating) DATE									101.40	
12. TITLE	OFFICERS AND DIRECTORS DELETE			13.	13. 1.1 Title		ADDITIONS/CHANGES TO OFFICERS		IN 12 Addition	
	PULS, WALTER						•	Change		
NAME ATREET ARRESTOS	2518 MONTEREY COURT			1.2 N					1	
STREET ADDRESS	FT. LAUDERDALE FL 33327	,	1.3 STREE						[]	
CITY-ST-ZIP	D DAODENDALE 12 00021				1.4 City-St-ZiP 2.1 Title			Change	Addition	
NAME	PULS, FLOR		2.2 N			1		La change	Addition [
STREET ADDRESS	2518 MONTEREY COURT					ADDRESS				
	FT. LAUDERDALE FL 33327	•				· 1				
CITY-ST-ZIP TITLE	THE TOPPHONEL IL COOL		DELETE	2. 4 C		1-ZIP		Change	Addition	
NAME				3.1 N		ļ		L., Ondrigo	7.000000	
STREET ADDRESS						Anneree				
CITY-ST-ZIP				3.3 STREET ADDRESS 3.4. CITY - ST - ZIP						
TITLE			DELETE 4.1 TO			1 · ZU:		Change	Addition	
NAME				4.2 N						
STREET ADDRESS						ADDHESS			1	
CITY-ST-ZIP				4.4 CI					ļ	
TITLE			DELETE	5.1 10				Change	Addition	
NAME			_	5.2 NA			•			
STREET NOORESS	· (· · • • • · · ·		•			ADDRESS		• • •	·	
CITY-ST-ZIP				5.4 CI						
TITLE		T. A. A. T. A.	DELETE	6.1 TIT				☐ Change	Addition	
NAME				6.2 NA	ME			-		
STREET ADORESS						ADDRESS				
CITY+ST-ZIP				64 CI					ļ	
		711 41 7 771				 				

4. 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 offect as if made under oath; that I am an officer or director of the corporation or the exceiver or trusted 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 attribute on with an address.

SIGNATURE FOR NAS SETUS

2/3/98 130

1305)5134565