

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

FILED

Feb 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000079843 (4)

1. Corporation Name  
PROCEDURE, INC.

Principal Place of Business

12965 S.W. 76 TERRACE  
MIAMI FL 33183

Mailing Address

12965 S.W. 76 TERRACE  
MIAMI FL 33183



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 17575 SW 13 ST		26 17575 SW 13 ST		09/25/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 City, State Pembroke Pines, FL		28 City, State Pembroke Pines, FL		65-0696710	
24 Zip 33029		29 Country USA		Applied For	
25		30		Not Applicable	
9. Name and Address of Current Registered Agent				5. Certificate of Status Desired	
FERNANDEZ, BRIGITTE A 12965 S.W. 76 TERRACE MIAMI FL 33183				<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	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	17575 SW 13 ST
83	
84 City	Pembroke Pines
85 State	FL
86 Zip Code	33029

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	P
NAME	FERNANDEZ, BRIGITTE A	12 NAME	RODRIGUEZ, BRIGITTE
STREET ADDRESS	12965 S.W. 76 TERRACE	13 STREET ADDRESS	17575 SW 13 ST
CITY-ST-ZIP	MIAMI FL 33183	14 CITY-ST-ZIP	Pembroke Pines, FL 33029
TITLE	D	21 TITLE	V
NAME	RODRIGUEZ, RAMON J	22 NAME	
STREET ADDRESS	12965 S.W. 76 TERRACE	23 STREET ADDRESS	17575 SW 13 ST
CITY-ST-ZIP	MIAMI FL 33183	24 CITY-ST-ZIP	Pembroke Pines, FL 33029
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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.

SIGNATURE:

R Rodriguez 2/10/98

984-441-2332

CR2E034 (10/97)