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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000082509 (6)

MEDICAL RECORD AUDITORS, INC.

Principal Place of Business

Mailing Address

1003 LANTANA AVE

10933 LANTANA AVE

FILED May 08 1997 8:00am Secretary of State



TAMPA FL 33612	TAMPA FL 33812-5957			
			3. Date Incorporated or Qualified 10/07/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	1 4	4. FEI Number	✓ Applied For
21 10933 Lantana Ave		ntana Ave.	59-340802	S Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State Z3 Tampa FL	City & State 28 Tampa	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 25	29 33612 30	Country	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes 🔯 No
9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Reg	istered Agent
PHAM, THANG		81 Name		
10933 LANTANA AVE		82 Street Addre	ess (P.O. Box Number is Not Acceptable	e)
TAMPA FL 33612				
		83		
L		84 City	, , , , , , , , , , , , , , , , , , , 	FL 85 Zip Code
 Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the obli- 	to of Florida. Such change was auth	norized by the corporation		
SIGNATURE THAMPINA	M THANG	CAO PHAN eg stered Agent signalure require	2 4 d when reinstating)	-30 - 97
12. OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
PRESIDENT	LJ DELETE	1.1 TALE		Change Addition
NAME THANG PHAM		1.2 NAME		
STREET ADDRESS 10933 Lantana	AVC	1.3 STREET ADDRESS		i i
CITY-ST-2119 Tampa FL 33	1616	1.4 CITY - ST - ZIP		
TITLE	☐ DELETÉ	2.1 1111.1		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	Land Country	3.2 NAME		
STREET ADDRESS		3.9 STREET ADDRESS		
CITY-ST-ZIP		3.4. C/1Y - S1 - Z/P		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME .		4. 2 NAME		·
STREET ADDRESS		4.3 STREET ADDRESS		}
City-st-zip		4.4 CITY-ST-ZIP		į
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREFT ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	☐ DELF1E	61 TITLE		☐ Change ☐ Addition
NAME .		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		1
CITY-ST-ZIP		G.4 CITY - ST - ZIP		

The interpretation 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 eath; 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