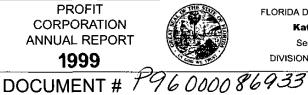
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90142 012 ***150.00

1. Corporation	NAME DICAL RESOURCE	es In	ITERNA	477 <i>0</i> L	AL, P. A	4.			
Principal Plac	e of Business	Mailing Ad	dress	^ & \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	c (US,				
13045	SAVILE WAY	1 20	145 21	4000					
BROOKSVILLE, FL 34614- SROOKSVILLE, FL						DO NOT WRITE IN THIS SPACE			
Brooksvine, FL 34614- Brooksvine, FL 2954 34614-2954						3. Date Incorporated or Qualifed			
	· · · · · · · · · · · · · · · · · · ·			7019	- 213 %	10/10/96			
	Place of Business	2a. Mailing	Address			4. FEI Number	<u> </u>	pplied For	
21 Cuito Ant	<i>5AME</i> #, etc.	26 Suite /	nt # etc			59-3407306		ot Applicable Additional	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired	•	equired	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
23	<u></u>					Trust Fund Contribution	•	Added to Fees	
Zip Country Zip				Country	,	8. This corporation owes the current year	ar Intangible		
24	25	29		30		Personal Property Tax.	☐ Yes	IFW₀	
	9. Name and Address of Currer	t Registered Ag	gent			10. Name and Address of New Register	red Agent		
JAM	185 B. TRAN	2/5		81	Name				
JAMES B. FRANCIS 13045 SADDIE WAY BROOKSUITE, 71. 34614 81 Name 82 Street Address 83						ss (P.O. Box Number is Not Acceptable)			
1/509	25 07227	-111	∠	83					
BRO	soks with the	3940		00					
	•			84	City		FL 85 Zip	Code	
11 Pursuant	to the provincing of Sections 607 050	2 and 607 1508	Florida Statute	s the above	e-named corpo			registered	
office or r	egistered agent, or both, in the State	of Florida. Such	change was au	thorized by	the corporation	ration submits this statement for the purposits board of directors. I hereby accept the a	ppointment as re	gistered	
	~ 1000	tions of, Section	Insis, Flor	iga Statules	•	>161G	5		
SIGNATURE	Shanature, baed or printed harne of registaced age	Trand title if applicable			nt signature required	when reinstating) DAT	É		
12.	OFFICERS AN	D DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	DRS IN 12	
TITLE	PD	DELETE		1.1 TITLE		.—	Change	Addition	
NAME	FRANCIS, JAMES 13845 SALLLE W	B		1.2 NAME					
STREET ADDRESS	13645 SALLIE W			1.3 STREE	FADDRESS				
CITY-ST-ZIP	BROOKSUILLE, +1	34617		1.4 CITY-S	T-ZIP			T Addison	
TITLE	BROOKSUITE 71.34614 STD DELETE PRANCIS AMY W 13045 SALELE WAY		2.1 TITLE	Ì		☐ Change	☐ Addition		
NAME	FRANCIS AMY WAY		2.2 NAME						
STREET ADDRESS	13045 3430	1 - 11 14			TADDRESS				
CITY-ST-ZIP	BROOKSVIlle, 71	3461	There -	2.4 CITY-S	ST-ZIP		Ghange	Addition	
NAME				3.2 NAME					
STREET ADDRESS					ADDRESS	•			
CITY-ST-ZIP				3.4, CITY-5	- 1				
TITLE			☐ DELETE	4.1 TITLE			☐ Change	Addition	
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
TITLE			☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET				1	
CITY-ST-ZIP			☐ DELETE	5.4 CITY-S'	1-ZIP		Chance		
TITLE			- DELETE	6.2 NAME			☐ Change	Addition	
NAME				6.3 STREET	ADDRESS				
STREET ADDRESS				6.4 CITY-S	1			Ì	
14. i hereby c	ertify that the information supplied wi	th this filing does	not qualify for	the exempti	on stated in Se	ction 119.07(3)(i), Florida Statutes. I furthe	r certify that the	information	
indicated of	on this annual report or supplemental	annual report is	true and accur	ate and that	my signature s	shall have the same legal effect as if made	under oath; that	l am an	
Block 12 c	or Block 13 if chapped or on an attac	hment with	ddress, with all	other like er	npowered.	shall have the same legal effect as if made ad by Chapter 607, Florida Statutes; and th	at my hamo upp		