

AMG MEDICAL SERVICES, INC.



16201 NE 13th AVENUE ♦ NORTH MIAMI BEACH, FLORIDA 33162
Phone 305-944-9190 ♦ Fax 305/944-9540

P97000005594

July 8, 1998

Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: Document #P97000005594
AMG MEDICAL SERVICES, INC.
LETTER NO: 698A00035091

ATTENTION: Carol Mustain
Corporate Specialist
Amendment Section

Dear Carol:

Once again, thank you so much for taking the time to walk me through this problem. I really appreciate your helping in resolving this matter.

Please find enclosed the "Statement of change of registered office or registered agent or both for corporations". As per our discussion, I have filled in as much information as I could get. I would appreciate your filling in the blanks as you related you would do.

Best of health, happiness and prosperity.

Sincerely yours,

AMG MEDICAL SERVICES, INC.

Ginger Coopersmith
Ginger Coopersmith
Office Manager

/gmc
enc. document CR2F045(7/97)

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TALLAHASSEE, FLORIDA

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: AMG MEDICAL SERVICES INC.

2. The mailing address of the corporation is: 16201 NE 13 AVENUE,
N. MIAMI BEACH, FLORIDA 33162

3. Date of incorporation/qualification: _____ Document number: _____

4. The name and address of the current registered agent and office:

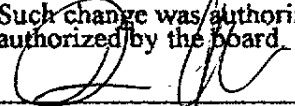
5. The name and address of the new registered agent and office: (P. O. Box Not Accepted)

DR. ALAN GARSON
16201 NE 13 AVENUE
N. MIAMI BEACH, FLORIDA 33162

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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.



(Signature of an officer, chairman or vice chairman of the board) 7-8-98

(Date)

DR. ALAN GARSON, PRESIDENT

(Printed or typed name and title) 7-8-98

(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



(Signature of Registered Agent) 7-8-98

(Date)

If signing on behalf of an entity:

(Typed or Printed Name) _____
(Capacity)

*** FILING FEE: \$35.00 ***