## 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 # P97000061073 (7)

PHARMACEUTICAL SERVICES HOLDING COMPANY

## **FILED** Feb 19 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address									188 1111 1881
10430 HUNTERS CREEK CT. 10430 HUNTERS CREEK CT.				T.	j				
JACKSONVILLE FL 32256 JACKSONVILLE FL 32256					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified	E IN THIS SPA	IUE .	
						07/14/1997			
2. Principal F	Place of Business	2a. Mailing	Address			4. FEI Number	<del></del>	- VIA-	plied For
21	The state of the s	26				4. Tel Hombol			plied For t Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.					\$8.75 A	
22	•	27	¬ '''			5. Certificate of Status Desired	□ '	Fee Re	
City & State		<del></del>	City & State			6. Election Campaign Financing		\$5.00	<del>- i</del>
23		28				Trust Fund Contribution		Added to	
Zip	Country	Zip		Country		8. This corporation owes or has p	aid the curren		
24	25	29	3	o		Personal Property Tax due Jun			No
	9. Name and Address of Cur	rent Registered Age	ent	·		10. Name and Address of New R		nt	<u>,                                     </u>
Pl	JTNAL, BRYAN L	Brua	1 0 4 4						
CHATE 4000						(P.O. Box Number is Not Accepta	hin)		
FIRST UNION TOWER						Kunters (real to	Die)		
	CKSONVILLE FL 32202	Contract Con	<u> </u>						
				24 00					
_				84 City 7	Tack.	حصيواله .	FL	35 Zip C	2.€2.
11. Pursuant	to the provisions of Sections 60 .0	502 and 607.1508, F	lorida Statutes	the above-named	corpore	ation submits this statement for the	purpose of ch		
11. Pursuant to the provisions of Sections 60, 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 body, 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 the appointment of Section 607,0505, Florida Statutes.									
SIGNATURE 1-7-98									
Signature-typod or printed hamo of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling)  DATE									
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DI	RECTOR	\$ IN 12
TITLE	Prosident		DELETE	1.1 TITLE		•		Change	Addition
NAME	Tengel. Patrol			1.2 NAME		7			
STREET ADDRESS	Rt. I			1.3 STREET ADDRESS	İ	•	•		
CITY-ST-ZIP	Mayo, Fl. 32061	•		1.4 CITY - ST - ZIP		_			
TITLE			DELETÉ	2.1 TITLE	Vice-	President, Secretary, Tre	ا يستويا	Change	Addition
NAME				2.2 NAME	Bre	-Paradest Secretary, Tree			•
STREET ADDRESS				2.3 STREET ADDRESS	1042	o Hunters Week Ut.			Ì
CITY-ST-ZIP				2.4 CITY+ST-ZIP	7	would A. 32256			
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NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET ADDRESS					
CITY-ST-ZIP				3.4. CITY-ST-ZIP	1				
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NAME				4. 2 NAME			_	-	Ì
STREET ADDRESS				4.3 STREET ADDRESS	}				
CITY-ST-ZIP				4.4 CITY-ST-Z#P	i				
TITLE			DELETE	5.1 TITLE			70	Change	Addition
NAME				5.2 NAME	•		$\mathcal{M}$	-	/
STREET ADDRESS				5.3 STREET ADDRESS			4//	11	′/9
CITY-ST-ZIP				5.4 CITY-ST-ZIP				4	//
TITLE			DELETE	6.1 TITLE		**** •*** •*** •*** •***		-Ghange	Addition
NAME				6.2 NAME		30000243 -02/19/98010	ist ( [];		
STREET ADDRESS				6.3 STREET ADDRESS			JZ019		
CITY-ST-ZIP	^			i i		***500.00			
	ertify that the information supplied	with this Mina doo	not qualify for t	6.4 CITY-ST-ZIP	M 12 C 2	Nion 110 07/2Vi) Florido Ctatidas I	£ -41	Alexander :	

is ming does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information foul report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address. indicated on this annual report or supplemental appropriate and the second control of th officer or director of the corporation Block 12 or Block 13 if changed

7-8.60