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1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000

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DISEASE MANAGEMENT INNOVATIONS, INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place	e of Business	Mailing Address	
95 FIESTA W		95 FIESTA WAY	
	ALE FL 33301	FT LAUDERDALE FL 33301	DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified 07/31/1997
2. Principal P	lace of Business	28, Mailing Address	4. FET Number Applied For Not Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired
City & State	е	City & State	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution [] Added to Foes
7(p)	Country	29 Country 30	A. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
95	9. Name and Address of Curre ANG, JONATHAN FIESTA WAY LAUDERDALE FL 33301	nt Registered Agent B1 Na B2 Str B3 B4 Cit	og Address of New Registered Agent age Address (PiO. Box Number is Not Acceptable) (B5 Zin Sode)
11. Persuant office or ragent. La SIGNATURE	egistered agent, or both, in the State on tamiliar with, and accord the oblig spotter, typed or prefer transcoringistered agent of the OFFICERS At	e of Florida. Such change was authorized by the pations of, Section 607.0505, Florida Statutes.	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered harder required when reinstoing) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS CITY-ST-76* THEE NAME STREET ANDRESS	LIANG, JONATHAN C 95 FIESTA WAY FT LAUDERDALE FL 33301	1.2 NAML 1.3 STRELL ADDR 1.4 CHY- S1- 7P 2.1 THE 2.2 NAME 2.3 STRECT ADDR	Ff. Lande dals, FL 33301 Change Addition
CITY-51-70* TITU NAME		2 4 GHY-S1- ZIF 3.1 THE 7 3.2 NAME	
MAME FADDISESS NAME		3.3 STREET ADOR 3.4 CHY-SI-ZE 4.1 THE 4.2 NAME	
STREET ADDRESS GITY-ST-ZIP THLE NAME	-	4.3 STRIET ADDR 4.4 CHY-S1-749 DILETE 5.2 NAME	
STREET ADDRESS COTY - ST- ZIII* TOLE NAME		5.3 STREET ADDR 5.4 CHY+S1-2H* 6.1 THLE 6.2 NAME	
STREET ADDRESS	coelling they they information supplied to	6.3 STREEL ADDR	

indicated on this minual 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 are an officer or director of the corporation or the receiver or trusted 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.



DISEASE MANAGEMENT INNOVATIONS, INC.

95 Fiesta Way, Fort Lauderdale, Florida 33301 (954) 525-1650

September 19, 1998

Division of Corporations Annual Reports Filings Post Office Box 1500 Tallahassee, FL 32302-1500

RE:

Disease Management Innovations, Inc.

Profit Corporation Annual Report

Dear Sir/Madam:

Per your letters, the 1998 annual report for Disease Management Innovations, Inc., is enclosed along with the original check in the amount of \$150.00.

The original annual report was issued with Jonathan Liang (my deceased husband) as the primary officer. This report was initially filed with the appropriate changes noted, on January 15, 1998. The report was returned demanding an EIN number. After many months of ongoing correspondence, the Internal Revenue Service assigned this corporation an Employer Identification Number in August 1998.

The information on the enclosed annual report has been updated appropriately. Also enclosed are copies of: the social security cards of Jonathan and Kimberly Liang, the court order relating to Letters of Administration of Jonathan Liang's estate, and a copy of the death certificate of Jonathan Liang.

Your assistance in processing this report immediately, would be greatly appreciated as the corporation is to remain active.

Thank you for you assistance in this matter.

Sincerely,
DISEASE MANAGEMENT INNOVATIONS, INC.

Kimberly Liang Director

Encs.