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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham *

FILED

Mar 16 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000070491 (0)

AMERICAN MEDICAL CONSULTING GROUP, INC.

Principal Place	o of Business	Mailing Address) INDICATE OF THE PROPERTY OF	419(8 /319) (181 1881	
200 EL VEDADO WAY PALM BEACH FL 33480 200 EL VEDADO WAY PALM BEACH FL 33480				DO NOT WRITE IN THIS SPAC	Œ	
				3. Date Incorporated or Qualified		
				08/14/1997		
2, Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		[26]		65-0776941	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		I & Continuate of Status Desired I I T	5. Certificate of Status Desired Security Securi	
City & State		City & State		6. Election Campaign Financing	6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zıp	Country	Zφ	Country	8. This corporation owes or has paid the current		
24	25		0	Personal Property Tax due June 30.		
				10. Name and Address of New Registered Agen	10, Name and Address of New Registered Agent	
RAMPELL, PAUL 125 WORTH AVENUE SUITE,202 PALM BEACH FL 33480			81 Name Val.c 82 Street 777	Ses-Fauli Corporate Services, I Address (P.O. Box Number is Not Acceptable) South Flagler Drive, Suite 500	<u>.</u>	
				: Palm Beach FL "	33401	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 with accept the programment of Section 507.0505, Florida Statutes. SIGNATURE Michael V. Mitrione, Vice President 3/9/98 ONL Registered Agent signature required when reinstaling) DATE						
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIR		
TITLE	D	DELETE	1.1 TITLE	P/T/D X	Change 🔲 Addition	
NAME	WINTER, RICHARD E DR.		1.2 NAME	Winter, Richard E. Dr.		
STREET ADDRESS	200 EL VEDADO WAY		1.3 STREET ADDRESS	200 El Vedado Way		
CITY-ST-ZIP	PALM BEACH FL 33480		1.4 CITY - ST - ZIP	Palm Beach, FT. 33480		
TOTLE		☐ DELETE	2.1 TITLE	Winter, Bella	Change X Addition	
NAME			2.2 NAME	200 El Vedado Way	ļ	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 CITY - ST - ZIP	Palm Beach, FL 33480		
TITLE		DELETE	3.1 TITLE		Change 🔲 Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP			
TITLE		DELETE	4.1 TITLE		Change	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change 🔲 Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TETLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicability and accurate and that my signature shall have the same legal effect as if made under oath; 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 of an altay liment with an or trees.