

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 # P97000099796

Continuicare Outpatient Services, Inc

Principal Place of Business Mailing Address 100 S.E. 2nd Street 36th Floor Miami, FL 33131

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified November 20, 1997
4. FEI Number 65-0796181
5. Certificate of Status Desired \$5.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.

2. Principal Place of Business 2a. Mailing Address
21 100 S.E. 2nd Street 26
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
23 City & State 28 City & State
24 Zip 29 Country 30 Zip Country

9. Name and Address of Current Registered Agent Susan Tarbe, Esq. Continuicare Corporation 100 S.E. 2nd Street, 36th Floor Miami, FL 33131

10. Name and Address of New Registered Agent 81 Name UCC Filing & Search Services, Inc. 82 Street Address (P.O. Box Number is Not Acceptable) 526 East Park Avenue 84 City Tallahassee FL 86 Zip Code 32301

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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: Billy B. Young Assistant Secretary 10/9/98

Table with 5 rows and 2 columns: 12. OFFICERS AND DIRECTORS. Includes Robert F. Thorne, President.

Table with 5 rows and 2 columns: 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes Kenneth Burkhardt, M.D., President.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 115.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: Kenneth L. Burkhardt 10/1/98

CR2E04 (10/97)

56 9-12-98