

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S90326

1. Corporation Name

CHILDREN'S HOSPITAL SERVICES, INC.

Principal Place of Business

4651 SHERIDAN STREET
SUITE 400
FORT LAUDERDALE FL 33021
US

Mailing Address

4651 SHERIDAN STREET
SUITE 400
FORT LAUDERDALE FL 33021
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MARTUS, JAY A
4651 SHERIDAN STREET
SUITE 400
FORT LAUDERDALE FL 33021

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

Signature, typed or printed name of registered agent and then if applicable

(NOTE: Registered Agent signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD
EISENBERG, MITCHELL
4651 SHERIDAN STREET
FORT LAUDERDALE FL 33021

[] DELETE

TITLE

VPD
GOLD, LEWIS
4651 SHERIDAN STREET
FORT LAUDERDALE FL 33021

[] DELETE

TITLE

VPD
GATES, DENNIS
4651 SHERIDAN STREET
FORT LAUDERDALE FL 33021

[X] DELETE

TITLE

VP
MARTUS, JAY A
4651 SHERIDAN STREET
FORT LAUDERDALE FL 33021

[] DELETE

TITLE

VP
AUERBACH, A. RICHARD
4651 SHERIDAN STREET
FORT LAUDERDALE FL 33021

[] DELETE

TITLE

VP
CHANDLER, BARRY
4651 SHERIDAN STREET
FORT LAUDERDALE FL 33021

[] DELETE

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

500002841435--2

-04/16/99--01008--012

***4350.00 ***150.00

[] Change [] Addition

C/O
MICHAEL SCHUNDAER
4651 SHERIDAN STREET, SUITE 400
FORT LAUDERDALE FL 33021

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 13, 1999

(954)986-7770

0140163

CR2E034 (11/98)