

AMENDED

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

FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998 Amended	FLORIDA DEPARTMENT OF STATE Brenda B. Northam Secretary of State DIVISION OF CORPORATIONS
---	--

DOCUMENT # V30176
1. Corporation Name
CORSIL MEDICAL ENTERPRISES, INC.

Principal Place of Business
55 WESTON ROAD
SUITE 3320
FT. LAUDERDALE, FL 33326

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified 4/21/92	4. FEI Number 65-0326772	Applied For Not Applicable
3. Principal Place of Business 55 WESTON ROAD SUITE 3320 FT. LAUDERDALE, FL 33326 BROWARD	3a. Mailing Address 55 WESTON ROAD SUITE 3320 FT. LAUDERDALE, FL 33326 BROWARD	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	7. This corporation owes or has paid the current year (assessible) Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$5.00 May Be added to Fees

8. Name and Address of Current Registered Agent
CORDOVA, CESAR G.
7895 NW 7th COURT
PLANTATION, FL 33324

9. Name and Address of New Registered Agent
SNYDER, DAVID M.
55 WESTON ROAD
SUITE 3320
FT. LAUDERDALE, FL 33326

11. Pursuant to the provisions of Sections 807.5502 and 807.1504, 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, am familiar with, and accept the obligations of, Section 807.5505, Florida Statutes.

SIGNATURE: DAVID M. SNYDER
4-18-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN/IE	
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP CORDOVA, CESAR G. 7895 NW 7th COURT PLANTATION, FL 33324	<input checked="" type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP P/T/D SNYDER, DAVID M. 1011 FAIRFAX LANE WESTON, FL 33326	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP VP/S DE CORDOVA, BLANCA S. 7895 NW 7th COURT PLANTATION, FL 33324	<input checked="" type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP VP/S SILVA, BETTY 1011 FAIRFAX LANE WESTON, FL 33326	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP	<input type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP	<input type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP	<input type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP	<input type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP	<input type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 TITLE NAME STREET ADDRESS CITY-ST-SP	<input type="checkbox"/> DELETE	13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-SP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

I, the undersigned, hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(f), Florida Statutes. I further certify that the information indicated in the 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: DAVID M. SNYDER, PRESIDENT 4-18-98 (954) 984-9751

CR22034 (10/97)