

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V47003

1. Corporation Name

Premier Health Care Inc.

Principal Place of Business

Mailing Address

16170 NE 11 Ct.
North Miami Beach
Fla. 33162

Same

2. Principal Place of Business

2a. Mailing Address

21 16170 NE 11 Ct.

26 Same

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 N.M.B.

28 City & State

City & State

29 Zip

24 Fla.

30 Country

25 33162

29 33162

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

6/92

4/95

4. Filing Number

Applied For

150 346564

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

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 607.1501, 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 607.0503, Florida Statutes.

SIGNATURE

Amelia R. Perez

Amelia R. Perez

DATE

05/10/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PRESIDENT	Amelia R. Perez	804 Verona Lake Drive	# Landudal, Fla. 33326

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Amelia R. Perez

(05) 944-6348

CR2E034 (12/95)