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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name V62786

(1)

STAT	MEDICAL	CLINIC	Ш	INC

	EDICAL CLINIC II, INC.		\ \ \			
ncipal Place o	of Business	Mailing Address				
13144 PARK BI STE B SEMINOLE FL	-	12302 NE 6 AVE. 1428 BRICKELL AVE NORTH MIAMI FL 3:				
JS		US	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 Date Incorporated or Qual 09/10/1992 	ified 3a. Date of Last 05/01/1	
Principal Pac	e of Business	2a. Mailing Address		4. FEI Number	00/01/1	Applied Fo
		26		65-0358734		Not Applica
Suite, Apt. #,	elc.	Suite, Apt. #, etc.		5. Certificate of Status Desire	2U [['	75 Additiona e Required
Ony & State		City & State		6. Election Campaign Financi		00 May Be
	· · · · · · · · · · · · · · · · · · ·	28		Trust Fund Contribution		ded to Fees
2 4)	Country	Zφ	Country	8. This corporation has liabilit		s 199.032,
	9. Name and Address of Curren	1 Registered Agent	30	·	Yes No	
	o. traine and reduced of Outre	it negistered Agent	81 Name	10. Name and Address of N	lew Hegistered Agent	
STACHEN	VITSCH ANDRE		7,201,16			
12302 NE			82 Street A	Address (P.O. Box Number is Not Aco	eptable)	
	CKELL AVE. 6TH FLOOR		83			
	IIAMI FL 33161					
110111111111	174411 1 2 55101		84 City		FL 85	Zip Code
Pursuant to	the provisions of Sections 607,0502	and 607.1508, Florida Stat	utes, the above named co	orporation submits this statement for the board of directors, i hereby accept the	TE Durnose of changing its	e registered
or registered	agent, or both, in the State of Florid	da. Such change was autho	rized by the corporation's :	board of directors, I hereby accept the	appointment as registere	ed agent. I a
NATURE	and accept the obligations of, Sections of sections are the probabilities and the sections are also as the section and the section are also as the sec		es. NOTE Registered Agent signature re		DATE	
NATURE .		and the if applicable (DATE OFFICERS AND DIRECT	TORS IN 12
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SIGNATURE:

SIGNATURES NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)893-7698