

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 2/9/95: \$275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 JUL 31 PM 12: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000001414 (1)

1. Corporation Name

DAOU SYSTEMS, INC.

Principal Place of Business

Mailing Address

**SUITE E
10360 SORRENTO VALLEY ROAD
SAN DIEGO CA 92121**

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10360 SORRENTO VALLEY ROAD
SAN DIEGO CA 92121**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

03/18/1994

4. FEI Number

Applied For

33-0284454

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301**

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 the corporation

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **CT**
NAME: **DAOU, JOSEPH H**
STREET ADDRESS: **14060 CAPEWOOD LANE**
CITY, ST, ZIP: **SAN DIEGO CA 92128**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

Change Addition

TITLE: **PD**
NAME: **DAOU, GEORGES J**
STREET ADDRESS: **13355 KIBBINGS ROAD**
CITY, ST, ZIP: **SAN DIEGO CA 92130**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

Change Addition

TITLE: **VSD**
NAME: **DAOU, DANIEL J**
STREET ADDRESS: **14228 BOUNTY WAY**
CITY, ST, ZIP: **POWAY CA 92064**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

Change Addition

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 in this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-25-95 619-452-2221 2700^{x+}

CR2E034 (3/95)