## U.S. SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

FORM 3

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

| 1.                                                          | Name and Address                 | s of Reporting Person*                               |                                         |                               |                                             |                |
|-------------------------------------------------------------|----------------------------------|------------------------------------------------------|-----------------------------------------|-------------------------------|---------------------------------------------|----------------|
| Carfora                                                     |                                  |                                                      | Alfred                                  | l<br>                         |                                             |                |
|                                                             | (Last)                           | (First)                                              | (Middle)                                |                               |                                             |                |
| c/o<br>                                                     | MIM Corporation                  | 100 Clearbrook Road                                  |                                         |                               |                                             |                |
| Elmsford                                                    |                                  | (Street)<br>NY                                       | 10523                                   |                               |                                             |                |
| (City)                                                      |                                  | (State)                                              | (Zip)                                   |                               |                                             |                |
|                                                             |                                  | equiring Statement (Month/                           |                                         |                               |                                             |                |
|                                                             | ember 2, 2002                    | equiling Statement (Month)                           | Day/ Teal )                             |                               |                                             |                |
|                                                             |                                  | <br>Lon Number of Reporting Pe                       |                                         |                               |                                             |                |
|                                                             |                                  |                                                      |                                         |                               |                                             |                |
| 4.                                                          | Issuer Name and                  | Ticker or Trading Symbol                             |                                         |                               |                                             |                |
| MIM<br>                                                     | Corporation (MIMS                |                                                      |                                         |                               |                                             |                |
| 5.                                                          | Relationship of (Check all appli | Reporting Person to Issue<br>icable)                 | r                                       |                               |                                             |                |
|                                                             | [] Director                      | ive title below)                                     | [ ] 10% Owner                           | , helow)                      |                                             |                |
| Pres                                                        | sident and Chief (               |                                                      | [_] Other (Specify                      | below)                        |                                             |                |
| 6. If Amendment, Date of Original (Month/Day/Year)          |                                  |                                                      |                                         |                               |                                             |                |
|                                                             |                                  |                                                      |                                         |                               |                                             |                |
| 7. Individual or Joint/Group Filing (Check applicable line) |                                  |                                                      |                                         |                               |                                             |                |
|                                                             |                                  | by One Reporting Person<br>by More than One Reportin | g Person                                |                               |                                             |                |
| ===                                                         |                                  |                                                      |                                         |                               |                                             |                |
| ===                                                         |                                  |                                                      | -                                       |                               |                                             |                |
|                                                             |                                  |                                                      | 3                                       | 3. Ownership Form:            |                                             |                |
|                                                             | Title of Security                | 2. Amoun<br>Benef                                    | t of Securities<br>icially Owned        | Direct (D) or<br>Indirect (I) | 4. Nature of Indirect Benefic<br>(Instr. 4) | cial Ownership |
|                                                             | (Instr. 4)<br>                   | (Inst                                                | r. 4)<br>                               | (Instr. 5)                    | (Instr. 4)                                  |                |
|                                                             | <br>mon Stock, \$.0001           | par value -0-                                        |                                         |                               |                                             |                |
|                                                             |                                  |                                                      |                                         |                               |                                             |                |
|                                                             |                                  |                                                      |                                         |                               |                                             |                |
| ===                                                         |                                  |                                                      |                                         |                               | =======================================     | ==========     |
| *                                                           | If the Form is $15(b)(v)$ .      | iled by more than one Rep                            | orting Person, see I                    | instruction                   |                                             |                |
| Rem:                                                        |                                  | a separate line for each cotly or indirectly.        | lass of securities b                    | eneficially                   |                                             |                |
|                                                             | owned direc                      | (Print of Type Res                                   | nonses)                                 |                               |                                             |                |
|                                                             |                                  | (1.1.1.6 6. 1) po 1.00                               | policecy                                | (Over)                        |                                             |                |
|                                                             |                                  |                                                      |                                         | /                             |                                             |                |
| =ORI                                                        | M 3 (continued)                  |                                                      |                                         |                               |                                             |                |
|                                                             |                                  | II Derivative Securitie<br>calls, warrants, options  |                                         |                               |                                             |                |
| ===                                                         | ============                     |                                                      | ======================================= | =========                     |                                             |                |
|                                                             |                                  |                                                      |                                         |                               |                                             |                |

3. Title and Amount of Securities
Underlying Derivative Security
(Instr. 4)

Amount

4. Conversion or

5. Ownership Form of Derivative Security: Direct

| Or Exercise (D) or Number Price of Indirect  1. Title of Derivative Exer- tion of Derivative (I)  Security (Instr. 4) cisable Date Title Shares Security (Instr. 5) |                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Security (Instr. 4) cisable Date Title Shares Security (Instr. 5)                                                                                                   | Indirect<br>Beneficial |
|                                                                                                                                                                     | Ownership              |
|                                                                                                                                                                     | (Instr. 5)             |
|                                                                                                                                                                     |                        |
|                                                                                                                                                                     |                        |
|                                                                                                                                                                     |                        |
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| =======================================                                                                                                                             | ========               |
| Explanation of Responses:                                                                                                                                           |                        |
| /s/ Alfred Carfora December 6, 2002                                                                                                                                 |                        |
| **Signature of Reporting Person Date                                                                                                                                |                        |

\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).