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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

	NUAL REPORT 1996		Secr	ra B. Mortham etary of State F. CORPORATIONS			
DOCU 1. Corporat	JMENT #	529235	(4)				
MAN	IUEL GARCIA-LII	NARES, M.D., P.A	•				
Principal Pla	nce of Business		Mailing Address				
3661 S. MIAMI AVE. SUITE#506 MIAMI FL 33133		·	3661 S. MIAMI AVE. SUITE#505 MIAMI FL 33133		A commonwealth of the state of		
<u> </u>	D				3. Date Incorporated or Qualified 03/28/1977	3a. Date of Last 05/01/1	Report
21	Place of Business	26	Mailing Address		4. FET Number 59-1727728	00/01/18	Applied For
Suite, Apt 2	t. #, etc.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.7	Not Applicable 5 Additional
City & Sta	ale		City & State		6. Election Campaign Financing	Fee	Required
3 Zip	Cou	untry 28	Zip	···	Trust Fund Contribution	Adde	00 May Be ed to Fees
4	25	29 dress of Current Regi	•	30 Country	8. This corporation has liability for Florida Statutes ** XX Yes	: 🗆 No	199.032,
AJAAN II				81 Name	10. Name and Address of New F	Registered Agent	
3661 S	EL GARCIA LINARE 3. MIAMI AVE.	:S		82 Street Add	dress (P.O. Box Number is Not Acceptat	ole;	
	FL 33133			83			
				84 City			
or ropinta		COUNTRY OUT VOORS AND BU	7.1508. Florida Statute	s, the above named cores	worker at the first process and the second	<u></u>	
IGNATURE		nio of registered agrest and tracific	appleable. (NOT		oration submits this statement for the purant of directors. Thereby accept the appropriate the pure th		registered office I agent. I am
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oath, that i am an officer or director of line corporation of the receiver of trostee el appears in Block 12 or Block 13 if changed, or on an attachment with an address. and that my signature shall have the same legal effect as it made under opport as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: Manuel Garcia-Linares

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

3/26/96

(305)285-0739