FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

602070

Shafaat Ahmed, M.D. Orthopaedic Surgery PA

FILED Jun 11 1998 8:00am Secretary of State

Principal Pla	ce of Business			g Address Mason A	Monuo				
				ona Beac			1		
			Dajo		2117	orrad	DO NOT WHITE IN TH	IIS SPACE	
•							3. Date incorporated or Qualified May 1, 1970		
2. Principal Place of Business			2a. Mailing Adoress				4. FEI Number		applied For
21			26				59-129-3994		lot Applicable
Suite. Apt	. #, etc.		27	te. Apt. #. etc.			5. Certificate of Status Desired		Additional Required
City & Sta	ite		City	y & State			6. Election Campaign Financing	\$5.00	May Be
23	· · · · · · · · · · · · · · · · · · ·		28				Trust Fund Contribution		to Fees
Zip	<u> </u>	28untry	Zip	'	Countr	ÿ	8. This corporation owes or has paid the		
24	25 25 and	Address of Curre	29	d Agent	30	· · · · · ·	Personal Property Tax due June 30. 10. Name and Address of New Registere		□ No
	e, (talle alle	Addition of Carry		2 7 10 11	81	Name -	Dr. Shafaat Ahmed	JO Mgont	
					82		idress (P.O. Box Number is Not Acceptable) 121 Mason Avenue		
					83		aytona Beach, Florida		
1						<u> </u>	aycona beach, riorida		
					84	City	F		Code
11. Pursuant	to the provisions of	Sections 607.05	02 and 607.1	508. Florida Statute	s. the appy	e-named co	rporation submits this statement for the purpose	of changing i	its registered
office or agent 1 a	regis tere d agent, d am famili <u>ar</u> with, an	or both, in the Stated accept the oblid	e of Florida S ations of Sec	uch change was a ctio = 07.0505, Fio	ulhorized by rida Slalule	y the corpora s.	ation's board of directors. I hereby accept the a	ppointment as	registered
SIGNATURE	v Man	And the	1	Land	7	-	4-29-98		
Old IV II Olik	Signature upon o print	of Americans of				er i signature red	oured when reinstating: DATE		
. 7=1		0.1102.101	ID DIRECTOR	RS DELETE	13,		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	Preside			Detere .	1171718			☐ Change	☐ Addition }
NAME CONSTANDANCE	Snaraat	Ahmed,	M.D.		1 2 NAME				į.
STREET ADDRESS		Peninsu			1.5 STREET		•		
TITLE	Daytona	Beach,	Florid	a 32118	14 CITY - S 21 TITLE	51 - ZIP	<u> </u>	Cnange	Addition
NAME	•			Deter-	22 NAME			Change	
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Tite				L J DECETE	3 1 TITLE	51-ZIP		Change	Addition
NAME					3.2 NAME	İ			La Masilian
STREET ADORESS					3 3 STREET	ADDRESS			ļ
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NAME					4 2 NAME	•		•	
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CITY-ST-ZIP					44 CITY - S				
TiTLE .				DELETE	5 1 TITLE			Cnange	Addition
NAME					5 2 NAME	1		-	- '
STREET ADDRESS					5 3 STREET	ADDRESS			
CATY - ST - ZIP					54 City-S	J			1
TITLE				□ DELETE	6 1 TITLE		and the state of t	☐ Cnange	Addition
HAME					62 NAME		7000025581 -06/12/98010270	1 1	
STREET ADDRESS					63 STREET	ADDRESS		148 7年	111
DITY ST. 7ID					A A Pity . ct	I	***150,00	- Y	6111

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report is frue and accurate and that my signature shall have the same legal effect as if made under call it is an under call in the same legal effect as if made under call it is an
SIGNATURE

4-29-98

1-904-255-1461