

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Carlos B. Morton
Secretary of State
1900 N. W. 11th Avenue

APPROVED
AND
FILED

95 MAY -1 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **673295** (2)

1. Corporation Name

PEDIATRIX MEDICAL GROUP OF FLORIDA, INC.

2. Principal Place of Business

1455 NORTHPARK DR
SUITE 300
FT LAUDERDALE FL 33326
US

2a. Mailing Address

1455 NORTHPARK DR
SUITE 300
FT LAUDERDALE FL 33326
US

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation in Florida

06/06/1980

2b. Date of Last Report

04/14/1994

2. Principal Place of Business

21

State Apt # etc

22

City & State

23

County

24

County

2a. Mailing Address

26

State Apt # etc

27

City & State

28

County

29

County

3. FFI Number

4

Applied For

5

Not Applicable

6

Certificate of Status Desired

7

\$8.75 Additional Fee Required

8

Electoral Campaign Financing

9

Trust Fund Contribution

10

\$5.00 May Be Added to Fees

11

This corporation has liability for intangible tax under S. 196.032, Florida Statutes.

12

Yes No

9. Name and Address of Current Registered Agent

ALVAREZ CESAR L
GREENBERG TRAUIG
1221 BRICKELL AVENUE
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: **Cathy Lerman**
82 Street Address (P.O. Box Number is Not Acceptable): **1455 Northpark Drive**
83
84 City: **Ft. Lauderdale FL** 85 Zip Code: **33326**

11. Pursuant to the provisions of Sections 607.030, 607.031 and 607.032, 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 provisions of, Section 607.030, Florida Statutes.

SIGNATURE

Cathy Lerman, Secretary 4/28/95

12. OFFICERS AND DIRECTORS

OFFICER	NAME	STREET ADDRESS	CITY & STATE
1	PD	MEDEL, ROGER J. 3035 SORREL COURT FT LAUDERDALE FL	
2	T	PAPADAKIS, JOHN 1455 NORTHPARK DRIVE FT LAUDERDALE FL	
3			
4			
5			
6			
7			
8			
9			
10			

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICER	NAME	STREET ADDRESS	CITY & STATE	Change	Addition
1	TREASURER	LARRY MULLEN 1455 Northpark Drive Ft. Lauderdale Drive		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	SECRETARY	CATHY LERMAN 1455 Northpark Drive Ft. Lauderdale FL 33326		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3				<input type="checkbox"/>	<input type="checkbox"/>
4				<input type="checkbox"/>	<input type="checkbox"/>
5				<input type="checkbox"/>	<input type="checkbox"/>
6				<input type="checkbox"/>	<input type="checkbox"/>
7				<input type="checkbox"/>	<input type="checkbox"/>
8				<input type="checkbox"/>	<input type="checkbox"/>
9				<input type="checkbox"/>	<input type="checkbox"/>
10				<input type="checkbox"/>	<input type="checkbox"/>

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.030(3), 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. I am an officer or director of the corporation or have the power to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE, OR PRINTED NAME, OF SIGNING OFFICER OR DIRECTOR