## 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

FILED									
17	1998	8:00am							
crei	tary of	f State							
	17	FILED 17 1998 cretary of							

II	MENT # F397 H. Bush, D.V.M., P.A.	798 (6)					
Principal Plac	e of Business	Mailing Address	<del></del>	<del></del> -		DEBLE BIRKE BIRKE	TIOM OTHER HOLD
	rseas hwy	27063 OVERSEAS HW	Y				
RAMROD K US	EY FL 33042	RAMROD KEY FL 3304 US	12		DO NOT WRITE IN THIS	SPACE	
00		US			3. Date Incorporated or Qualified		
					06/08/1981		
· ·	Place of Business	2a. Mailing Address			4. FEI Number	<del></del>	pplied For
Suite, Apt	# nto	Suite, Apt. #, etc.			59-2093781	<del></del>	ot Applicable
22 22	m, etc.	27 Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired
City & Stat	e	City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution		to Fees
<b>Z</b> ip	Country	Zıp	Count	у	8. This corporation owes or has paid the c		
24	25 g. Name and Address of Cu	29	30		Personal Property Tax due June 30.  10. Name and Address of New Registered		] No
	<del></del>	Helit Vafistelen våett	8	1 Name	10. Name and Address of New negistered	1 Whatir	<del></del>
	CRUZ, RENE 17083 OVERSEAS HWY						
	AMROD KEY FL 33042		8:	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
,,,	- WHITE THE TE SOUTE		6:	3			
,			8-	1 City		<b>85</b> Zip	Code
			ľ		FI	_	
11. Pursuant office or r agent. La	to the provisions of Sections 607, registered agent, or both, in the S im familiar with, and accept the ol	0502 and 607.1508, Florida Statul tate of Florida. Such change was bligations of, Section 607.0505, Fl	tes, the abo authorized b orida Statute	ve-named co by the corpor es.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing i pointment as	ts registered registered
SIGNATURE							
10	Signature, typed or printed name of registeres	d agent and title if applicable (NOT AND DIRECTORS	E: Registered A	gent signatura raq	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	
12. TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change	RS IN 12
NAME	CRUZ, RENE A.		1.2 NAME			•	
STREET ADDRESS	27063 OVERSEAS HWY		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	RAMROD KEY FL		1.4 CITY-	ST-ZIP			] [
TITLE	S.	DELETE	2.1 TITLE			Change	Addition
NAME	CRUZ, SHEILA 27063 OVERSEA.		2.2 NAME				
STREET ADDRESS	21063 OVERSON	S HWY	Ti .	T ADDRESS			ļ
CITY-ST-ZIP	RAMROW KEY FR	DELETE	2. 4 CITY	-ST-ZIP		Change	Addition
TITLE NAME			3.1 TITLE 3.2 NAME			L_I Criange	C Addition
STREET ADDRESS				T ADORESS			
CITY-ST-ZIP			3.4. CITY-				
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAMI	:			
STREET ADDRESS	Ti.		4.3 STREE	T ADDRESS			i
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME	1			)
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY- 6.1 TITLE	ST-ZIP		Change	Addition
TITLE NAME			6.2 NAME			ATT CHRINGS	/iddision
STREET ADDRESS				T ADDRESS			}
CITY-ST-ZIP			6.4 CITY-				
	certify that the information supplie	d with this filing does not qualify for			n Section 119.07(3)(i), Florida Statutes. I further of	ertify that the	information

Interest certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated 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 corporatory of the receiver or trustee physicisms of physicisms and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE

GNATURE

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