

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

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mcrtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F62463

1. Corporation Name

A.RICHMAN, M.D., P.A.

Principal Place of Business

**7900 GLADES ROAD, #610
BOCA RATON, FL 33434**

Mailing Address

SAME

3. Date Incorporated or Qualified

2/19/82

3a. Date of Last Report

4/26/95

2. Principal Place of Business

21

Suite, Apt # etc

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt #, etc

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2150676

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

**PEDRO L. DEDESMA
WHITE & CASE
200 S. BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature and typed or printed name of registered agent and filer (applicant)

(NOTE: Registered Agent signature required when changing agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D/P/S/T

DELETE

NAME

RICHMAN, ANDREW M.

STREET ADDRESS

7900 GLADES ROAD, #610

CITY - ST - ZIP

BOCA RATON, FL 33434

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

Change

Addition

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

Change

Addition

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

Change

Addition

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

Change

Addition

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

Change

Addition

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

Change

Addition

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

**300001785723
-04/18/96--01013--014
***200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report, as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDREW M. RICHMAN

4-10-96

Date

(407) 477-7750

Phone Number

CR2E034 (12/95)