

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90081 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # G72737 1. Corporation Name JOSHI & VIRALAM, M.D.S, P.A.		



Principal Place of Business 1300 N FLAGLER DR SUITE 229 WEST PALM BEACH FL 33401 US	Mailing Address C/O PEDIATRIK TAX DEPT. 1455 NORTHPARK DRIVE FT. LAUDERDALE FL 33326 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 12/02/1983	
		4. FEI Number 59-2161564		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 owes the current year intangible Personal Property Tax. ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent JOSHI, ASHOK 1300 NORTH FLAGLER DR. SUITE 229 WEST PALM BEACH FL 33401		10. Name and Address of New Registered Agent 81 Name BRUCE A. JORDAN 82 Street Address (P.O. Box Number is Not Acceptable) 1455 N. Park Drive 83 84 City FT Lauderdale FL 85 Zip Code 33326	
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: <i>Bruce A. Jordan</i> DATE: 5-6-99			

12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP PD JOSHI, ASHOK 1300 N. FLAGLER DR. #229 WEST PALM BEACH FL ST VIRALAM, GUNDANASETTY 1300 N FLAGLER DR #229 WEST PALM BEACH FL (Empty rows with DELETE checkboxes)		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR 3 IN 12 1.1 TITLE TREASURER 1.2 NAME Larry Mullen 1.3 STREET ADDRESS 1455 N. Park Drive 1.4 CITY-ST-ZIP FT. Lauderdale, FL 33326 2.1 TITLE Secretary 2.2 NAME Bruce Jordan 2.3 STREET ADDRESS 1455 N. Park Drive 2.4 CITY-ST-ZIP FT Lauderdale, FL 33326 3.1 TITLE Vice President 3.2 NAME Richard M. Jordan 3.3 STREET ADDRESS 1455 N. Park Drive 3.4 CITY-ST-ZIP FT. Lauderdale, FL 33326 (Empty rows with Change/Addition checkboxes)	
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14. I hereby 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 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

99-51

CR2E034 (11/98)