## PROFIT CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherino Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # J48986**

Principal Pla 210 JUPITER BLDG. 3000 JUPITER FL 3		Mailing Address 210 JUPITER LAKES BLVD. BLDG. 3000 JUPITER FL 33458		DO NOT WRITE IN T	
				12/29/1986	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26		59-2748534	Not Applicable
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired .	\$8.75 Additional
City & St	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
3	Country	Zip	Country	Trust Fund Contribution  8. This corporation owes the current yea	
Z3p □	— · ·	L	30	Personal Property Tax.	☐ Yes <b>M</b> No
4	9. Name and Address of Curre		···	10. Name and Address of New Registe	red Agent
			AND THE	Agar Thornton M.D.	
	GEL, VICTOR, M.D. PRIDGE ROAD		82 Street Add	iress (P.O. Box Nuir, ber is Not Acceptable). L	ROAP
	PITTER FL 33477		83 (0.51.5	9 DONALD RUSS	<u> </u>
301	FILER FL SOATT				
			84 AH M	BEACH GARDENS I	FL 85 33418
11. Pursuar	t to the provisions of Sections 607.050	02 and 607.1508, Florida Statut of Florida, Such change was a	is, the above-hamed control the	poration submits this statement for the purposion's board of directors. I hereby accept the a	ppointment as registered
office or agent. I	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	ations of Section 607.0505 Flo	rida Statutes.  Regulared Agent significan require	ud when reinstating)  DATI	-99
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4. I hareby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certry that the information indicated on this annual report as pupelmental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am 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** 

OUN OUT AT MUDULANT OFFICER OF DIRECTOR

561-747-3777

FILED Apr 14, 1999 8:00 am Secretary of State 04-14-1999 90129 023 \*\*\*150.00

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