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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name J80622

(0)

LAWRENCE A. TEPPER AND ALLEN F. SCHULTZ, D.O., P

Principal Place of Business Mailing Address								
% Lawrence A. Tepper do 2051 45Th ST #107 W Palm Beach Fl. 3:407		% LAWRENCE A. TEPPER DO 2051 45TH ST #107 W PALM BEACH FL 33407						
			L 30-401		 Date Incorporated or Qualified 07/01/1987 	3a. Date of Last Report 04/18/1995		
2. Principal Pla 21	ace of Business	2a. Mailing Address 26			4. FEI Number 59-2820471	Applied Not Ar	d For oplicable	
Suite, Apt. #, etc.		Suite, Apt. #. etc.		5. Certificate of Status Desired S8.75 A Fee Rec		dditional		
City & State	2	City & State			Election Campaign Financing Trust Fund ConInbution	\$5.00 Ma		
Ζιρ 24	Country 25	Ζιρ 29	Gountry 30		8. This corporation has liability for Florida Statutes Yes	intangible tax under s 199.0)32,	
L	Name and Address of Curren	t Registered Agent			10. Name and Address of New F	egistered Agent		
			81	Name				
TEPPER, LAWRENCE A. DO 2051 45TH ST #107			82	Street	t Address (P.O. Box Number is Not Acceptable)			
	BEACH FL 33407		83					
			84	City		FI 85 Zip Code	э	
Ui register	io the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	1:1. Such change was authorize	ad by the com	named or oration's	orporation submits this statement for the pur board of directors. I hereby accept the app	pose of changing its register pintment as registered agent	red office i. Lam	
SIGNATURE	Skynature, tycod or preteo han 6 or registered a jest.	and the if approanse (NO)	1E Begisteral Ajor	Esprahaea	स्था माहिती अरोक्षेत्र करतार्थ (देवस)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		12	
TITLE	D	□ ĐĒLĒTĒ	1 1 TEF			···	Addition	
NAME	TEPPER, LAWRENCE ANDRE		1.2 NAME					
STECET ADDRESS	2051 45TH STREET, SUITE 1	07	1 3 STREET	ADDRESS				
CITY - ST - ZIP	W. PALM BEACH FL		14 OHY - S	L. ZIC				
TIT_E	D	DELFTE	2 1 TITLE			Cnange	Add tion	
NAME	SHULTZ, ALLEN F		2.2 NAME		SCHULTZ	GR		
STREET ADDRESS	2051-45TH STREET, SUITE 1	07	2 3 STREET	ADORESS	3			
CITY-ST ZIP	W. PALM BEACH FL		2.4 CiTy - S					
TITLE		[] DELETE	3 1 11/16			Change 7	Addition	
NAME			3 2 NAME					
STREET ADDRESS			33 STREE	ADDRESS				
C:TY - ST - Z:P			3.4 CITY - S					
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NAME			4.2 NAME			<u> </u>		
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			44 CITY - S					
THLE	☐ DELETE		5 1 TITLE		☐ Change ☐		Addition:	
NAME:			5.2 NAME				2-m	
STREET ADDRESS			53 STHEFT	PARAGON				
CITY-ST-ZIF			54 CITY - S					
TILE		□ DE: FTE	6 3 TITLE	· · //r		Change [] /	Addition	
NAMÉ		<u> </u>	6.2 NAME				AGOITO":	
- e- n f L			DZ NAME					

14. I do hereby certify triat the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 logal 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 15 Pchanged, or on an attachment with an address.

6.3 STREET ADDRESS

6.4.0(1Y-ST-Z-P

SIGNATURE: 5

STREET ADDRESS

CITY - S1 - ZIF

Lawrence A. Tepper, D.O. SIGNATURE AND TYPEO OR PRINTED NEW OF SIGNING OFFICER OR