## FILE NOW: FILING FEE AFTER MAY 1 IS \$550 00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 06 1997 8:00am

Secretary of State

Sandra B. Mørtham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000045640 (8)

BERNARDO PASCUAL, M.D., P.A.

7100 W 20TH AVE SUITE 301 HIALEAH FL 33016		7100 W 20TH AVE Suite 301 Hraleah Fl 33016-1812			
HALENII FL 33	ло	MALENN PL SOUR-(B)2		3. Date Incorporated or Qualified 06/23/1993	3a. Date of Last Report 02/07/1996
2. Principal Pa	ace of Business	2a. Mailing Address	, , , , , , , , , , , , , , , , , , , ,	4. FEI Number	Applied For
21		26		65-0428939	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23		28	Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	This corporation has liability for in Florida Statutes	tangible tax under s. 199.032, Yes :: No
24	25 25 Name and Address of Curren		30	10. Name and Address of New Reg	
TOO NAME OF PRINTERS OF PARTIES AND ADDRESS OF THE PARTIES OF THE					
STE			82 Street A	Address (P.O. Box Number is Not Acceptable	")
- MIAMI FL 33128					
	$\bigcirc$	/ \	84 City .		Inc. 7in Code
	1A AC	\ / /	" CINY	IAM   LAKES	FL 85 Zip Code 33016
11. Pursuant to a physions of Suction 607,050, and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
11. Pursuant to the Newsions of Station; 607(050) and 607,1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or rigidity and sent, or both, in the State of Florida Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. An including high and all cept the obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE	XX leed auti	7 aus/		$\mathcal{Q}$	25/94
Sid to gradual printed in the of register distributible if applicable. (NOTE			Registered Agent signature		DATE /
12.	DP \\ \text{OFFICERS AN}	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
701.6	CASADEMONT, LETICIA T	DECEIE.	1 1 TITLE		C Cuange C Roomon
NAME	7100 W 20TH AVE SUITE 301		12 NAME		
STREET ADORESS	HIALEAH FL		1.3 STREET ADDRESS		
CITY-ST-ZIE TITLE	\$	DELETE	1.4 CHY-ST-ZIP 2 1 TITLE	PRESIDENT	Change Addition
NAME.	PASCUAL, BERNADROO		22 NAME	PASCUAL BERNARDO	<b>—</b> • • • • • • • • • • • • • • • • • • •
SIREF LADORESS	7100 W. 20 AVE #301		23 STREET ADDRESS	Pascual, Bernardo 7100 w 2014 aic #301	
CHY-ST ZIP	HIALEAH FL		2 4 CITY+ST-ZIP	HIAVENH, FL 33016	
11111		DELETE	3.1,TITLE		☐ Change ☐ Addition
NAME	CASADEMONT, ANDRES J		3.2 IAME		
STREET ADDRESS	7100 W. 20 AVE #301		3.1 TREET ADORESS		
CITY-ST-ZIP	HIALEAH FL	Design	3. :ITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4 TLE	TREASURER ISECRETARY E.CAROLINA PASCUAL 7100 W 2071 AVE #301	Change Addition
NAME CONTRACTOR			IAME	TION W TON AVE #301	
STREET ADDRESS CITY - \$1 - ZIP			IREET ADORESS	HIBLEAN, FL 33016	The second second
TILE		☐ DELETE	5 ITLE		Change Addition
NAME			5 IAME		*
STREET ADDRESS			STREET ADDRESS		
CIFY - ST - ZIP			5 CITY-ST-ZIP		
Tifl(F		DELETE	6 TITLE	,	Change Addition
NAME		_	6 NAME		
STREET ADDRESS		•	6 STREET ADDRESS		
CITY - ST - 76P			CITY-ST-ZIP		
information	ly cert fy that the information supplie is indicated on this annual report or s	suonlemental annual report is 🛍	ie and accurate and	tated in Section 119.07(3)(i), Florida Statutes, that my signature shall have the same legal	effect as if made under oath; that
1 I am an of	ficer or director of the corporation of Block 12 or Block 13 if changed, o	the receiver or trustee empoise	ared <b>L</b> i execute this ri	eport as required by Chapter 607, Florida St	atutes; and that my name