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PROFIT CORPORATION ANNUAL REPORT **1997**



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000052191 (1)

P.T. FASS M.D., P.A.

SIGNATURE:

Principal Place	o of Business	Mailine Add	1000					
2999 N.E. 191 SUITE 200 AVENTURA FL	STREET	2999 N.E. 16 SUITE 200	Mailing Address 2999 N.E. 191 STREET SUITE 200 AVENTURA FL 33180-3116					
MAEMIOUW LE	33100	NICHIORN				3. Date incorporated or Qualified 07/01/1994 3a. Date of Last Report 03/05/1996		
2. Principal Pl	lace of Business	—'n ~	2a. Mailing Address 26			4. FEI Number 65-0493368	 	Applied For Not Applicable
Suite, Apt	#, ole.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired	, , , ,	Additional
22		27					Fee F	Required
City & State		City & St 28	ale 			6. Election Campaign Financing Trust Fund Contribution	oebbA 🔲	0 May Be d to Fees
Zip	Country	——————————————————————————————————————		Count	У	8. This corporation has liability for intangible tax under s. 199 032,		
24	25 9. Name and Address of Curre	29 29 And Registered And	····-	30	·····	Florida Statutes 10. Name and Address of New R	Yes No	
DIGI	KIN, STAN L ESQ.	ilit negistered Age	2111	8	Name	IV. Harrie and Address of New I	alieteten vilour	
499	NORTHWEST 70 AVENUE				82 Street Address (P.O. Box Number is Not Acceptable) 83			
	te 120 Ntation FL 33317							
				8	1 City		FL 85 Zip	o Code
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such r	channe was a	uthorized I	ov the corpora	rporation submits this statement for the ation's board of directors. I hereby according	purpose of changing apt the appointment a	its registered is registered
SIGNATIONE	Signal ire typild or printed name of registered a	gent and litle it applicable	(NOTE	: Registered A	gent signature requ	uired when reinstating)	DATE	
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF		
TIFLE	PD Fass, Paul T	L] DELETE	1,1 TITLE			☐ Change	Addition
NAME.	3000 ISLAND BLVD 1902		•	1,2 NAM				
STREET ADDRESS	N MIAMI BEHAC FL				ET AODRESS			
CITY-ST-ZIP TITLE		[DELETE	1.4 CiTY 2.1 TITUE			Change	Addition
NAME				2.2 NAMI	i			
STREET ADDRESS				2.3 STRE	ET ADDRESS			
CHTY+S1-ZIP				2 4 City	-ST-ZIP	1.0		
100.5		E.	DELETE	31 TITLE			[] Change	Addition
NAMÉ				32 NAM	1		*	
STREET ADDRESS					ET ADORESS			
CITY-ST-ZIP			DELETE	3.4 CITY 4.1 TITLE			☐ Change	Addition
TITLE NAME		L		4, 2 NAM			L Ortango	L Madition
STREET ADDRESS					ET ADDRESS			
CITY - S1-ZIP				4.4 CITY				
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAM	.			
STREET ADDRESS				5.3 STRE	ET ADDRESS			
CITY-ST-7IP				5.4 CITY	-ST-ZIP			
TOLE]	DELETE	6.1 TITLE			Change	Addition
NAME				62 NAM	E			
STREET ADDRESS	^				EY ADDRESS			
Crity-ST-7IP	nu postilu that the information and		one not quelle	64 CITY		ed in Section 119.07(3)(i), Florida Statu	tae further contidu th	at the
informatio Lam an o	by certify that the information sliph) on indicated on this annual report of difficer or director of the corporal in in Block 12 or Block 13 if changis.	sur stemental ann A la deceiver or tr	ual report is tr	ue and ac ered to ex	curate and thi	at my signature shall have the same leg ort as required by Chapter 607, Florida	gal effect as if made u	under oath; that