FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000026153 (2)

WILLIAM N. HANDELMAN, M.D., P.A.

FILED Jan 30 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		
6711 38TH AVE N	6374 7TH AVE N		
ST. PETERSBURG FL 33710	ST PETERSBURG FL 33710)	DO NOT WRITE IN THIS SPACE
US			3. Date Incorporated or Qualified
			03/25/1996
2. Principal Place of Business	2a, Mailing Address		4. FEI Number Applied For
27 6399 38+h AV	EN 26 6399 38+	h AUE 1	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	S8.75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State	ر سس	Election Campaign Financing \$5.00 May Be
23 Stifeters bupg t L	- 28 St. PETERS D	NR9 YL	Trust Fund Contribution Added to Fees
Zip Country C	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 33710 26 05	29 33 10	30 0 5	Personal Property Tax due June 30. 🔲 Yes 🔲 No
g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent			
HANDELMAN, WILLIAM N		81 Name	
6374 7TH AVE N		82 Street A	ddress (P.O. Box Number is Not Acceptable)
ST PETERSBURG FL 33710			
		63	
		84 City	■■ 85 Zip Code
			FL 183 ZIP COOL
11. Pursuant to the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes	s, the above-named of	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the ob	ligations of, Section 607.0505, Flor	ida Statules.	oralions board of directors. Proteby accept the appointment actrogratered
SIGNATURE			
Signature, typod or printed name of registered		Registered Agent signature r	
<u> </u>	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P	["] DETEN	1.1 TITLE	
NAME HANDELMAN, WILLIAM N		1 2 NAME	HANDELMAN WILLIAM N.
STREET ADDRESS 6711 38TH AVE N		1.3 STREET ADDRESS	33710
CITY-ST-ZIP ST. PETERSBURG FL	☐ DELETE	1.4 C(TY - ST - ZIP 2.1 T(TLE	ST PBTE ICS DU IZY FL Change Addition
		22 NAME	Onlinge Realition
NAME		1	
STREET ADDRESS		2 3 STREET ADDRESS	
CITY-ST-ZIP	DELETE	2. 4 C/TY - S1 - Z/P 3.1 T/TLE	Change Addition
· ·	C occent	3.1 TILLE 3.2 NAME	C Vitaligo C Havaillon
NAME			
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Change Addition
NAME CTUTES ADDRESS		4.2 NAME	ι
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	☐ DELETE	4.4 C(TY - ST - Z(P 5.1 TITLE	☐ Change ☐ Addition
NAME	D perrie	5.2 NAME	C susually
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP TIFLE	DELETE	5.4 C(TY - ST - ZIP 6.1 T(TLE	Change Addition
NAME	First pertition	6.2 NAME	Est Avenda Est vigural.
		6.3 STREET ADDRESS	
STREET ADDRESS			
CITY-ST-ZIP 14. hereby certify that the information supplied	d with this filing does not qualify for	6.4 CITY-ST-ZIP the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or suppleme	ental annual report is true and accu	rate and that my sign	iature shall have the same legal effect as it 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.			