

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90022 029 ***150.00



AMOUNT DUE ON OR BEFORE 06/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750)
PROFIT CORPORATION ANNUAL REPORT 1999
 FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000042447
 I. Corporation Name
EMILIO F. LASTARRIA, M.D., P.A.

Principal Place of Business: 13615 BRUCE B. DOWNS BLVD. #113 TAMPA FL 33613-4658
 Mailing Address: 13615 BRUCE B. DOWNS BLVD. #113 TAMPA FL 33613-4658

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/17/1996**

4. FEI Number: **59-3407535** Applied For: Not Applicable:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property: Yes No

9. Name and Address of Current Registered Agent: **FORLIZZO, ROBERT A
13577 FEATHER SOUND DRIVE
SUITE 300
CLEARWATER FL 34622**

10. Name and Address of New Registered Agent: **Emilio Lastarria
13615 Bruce B. Downs Blvd #113
Tampa FL 33613**

I, Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **6-30-99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
LE	P LASTARRIA, EMILIO 13615 BRUCE B DOWEN BLVD. TAMPA FL	1.1 TITLE	13615 Bruce B. Downs Blvd #113 Tampa, FL 33613
ME	<input type="checkbox"/> DELETE	1.2 NAME	
REET ADDRESS		1.3 STREET ADDRESS	
Y-ST-ZIP		1.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	2.1 TITLE	
ME		2.2 NAME	
REET ADDRESS		2.3 STREET ADDRESS	
Y-ST-ZIP		2.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	3.1 TITLE	
ME		3.2 NAME	
REET ADDRESS		3.3 STREET ADDRESS	
Y-ST-ZIP		3.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	4.1 TITLE	
ME		4.2 NAME	
REET ADDRESS		4.3 STREET ADDRESS	
Y-ST-ZIP		4.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	5.1 TITLE	
ME		5.2 NAME	
REET ADDRESS		5.3 STREET ADDRESS	
Y-ST-ZIP		5.4 CITY-ST-ZIP	
LE	<input type="checkbox"/> DELETE	6.1 TITLE	
ME		6.2 NAME	
REET ADDRESS		6.3 STREET ADDRESS	
Y-ST-ZIP		6.4 CITY-ST-ZIP	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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 legal 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 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **6-30-99** DAYTIME PHONE #: **813-971-9850**

CR2E034 (5/99)

PALESTINE 2447
607073-9006-6



Male and Female Urology
and Urological Surgery

James C. Etheridge, M.D., P.A.
Emilio F. Lastarria, M.D., F.A.C.S.
Brent C. Sullivan, M.D.

TO: FLORIDA DEPT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 1500
Tallahassee, FL 32302-1500

FEI # 59-3407535
Document # P96000042447


*** * * * * S E C O N D R E S P O N S E * * * * ***

Per my phone call to 1-850- 487-6059 ^{DEPT OF STATE} (KATHY HIMAN) on July 19, 1999 @ 4:02 p.m. I AM NOT REQUIRED TO PAY THE \$400.00 late fee if I explained that we had never received the ORIGINAL INVOICE....

This will be my second letter which you casually must have disregarded the 1st when it was attached to the Annual Report Filing Document changes. THIS letter that was previously written EVEN explained you had the wrong spelling of the address PLUS the registered agent was simply the individual who wrote up the original corporate papers.

So now, twice I have been told by a Kevin @ DEPT of STATE back in June and now today, KATHY HIMAN @ Dept of State that with this letter and explanation I AM NOT REQUIRED TO PAY THE LATE FEE and can be waived this one time only !!

If you have any doubt, please call KATH HIMAN at the above number.

Signed 
Emilio Lastarria