Applied For

\$8.75 Additional

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000059784

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

KURT THEODORE, O.D., P.A.

Principal Place of Business	Mailing Address
14941 DALE MABRY HIGHWAY NORTH	14941 DALE MABRY HIGHWAY NORTH
TAMPA FL 33618	TAMPA FL 33618

2a. Mailing Address

Suite, Apt. #, etc.

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90004 031 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

59-3524929

07/07/1998

4. FEI Number

22	,	27	7	p.i. ii, 0.0i			5. Certifcate of Status Desired	30.73 /	Additional equired
City & S	tate		City & S	itate			6. Election Campaign Financing	\$5.00	-i
23		28					Trust Fund Contribution	Added	
Zip	Country	\vdash	Zip	_	Country		8. This corporation owes the current yes	ar Intangible	
					0		Personal Property Tax.	☐ Yes	□No
·	9. Name and Address of Curre	ent Reg	istered Ag	ent			10. Name and Address of New Registe	red Agent	
RI	JTT, JEFFREY DREW ESQ.				81	Name			
201 EAST KENNEDY BLVD. #1000 TAMPA FL 33602					82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
						O LI GOL 7 LGC	(1.0. Dox Humber is Not Acceptable)		
IA	IMPA PL 33002				83				
					-				
					84	City		FL 85 Zip (Code
11. Pursuar	nt to the provisions of Sections 607.05	02 and	607.1508, 1	Florida Statutes	, the above	e-named corr	noration submits this statement for the numer	o of changing its	registered
OHICE OF	r registered agent, or both, in the Stati	OF PION	ida. Such d	nange was auti	norized by	the corporati	ion's board of directors. I hereby accept the a	ppointment as re-	gistered
	am familiar with, and accept the oblig	ations o	or, Section t	007.0505, Florid	a Statutes	•			
SIGNATURI	Signature, typed or printed name of registered ag	ant and title	a if applicable	AIOTE, D		4 - i	ed when reinstating) DAT		
12,	OFFICERS A			(NOTE: N	13.	c signature require	ed when reinstating) DAT ADDITIONS/CHANGES TO OFFICER		DC 1N 42
TITLE	D			DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICER	Change	Additio
NAME	THEODORE, KURT		-		1.2 NAME			□ Change	□ Additio
STREET ADDRES	44400 11011 11051 05 00 105						•		
	TAMPA FL 33624				1.3 STREET				
CITY-ST-ZIP TITLE	TAMER PE 33024			DELETE	1.4 CITY-ST	-ZIP			
			L	T DEFEIG	2.1 TITLE			Change	Addition
NAME					2.2 NAME				
STREET ADDRES	S			i	2.3 STREET	ADDRESS			
CITY-ST-ZIP					2.4 CITY-5	Γ-ZIP			
TITLE			L	DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME					3.2 NAME		•		
STREET ADDRES	s				3.3 STREET	ADDRESS			
CITY-ST-ZIP					3.4. CITY-ST	-ZIP			
TITLE				DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME					4. 2 NAME				
STREET ADDRESS	s				4.3 STREET	ADDRESS			
CITY-ST-ZIP					4.4 CITY-ST	-ZIP			
TITLE			Ĺ	DELETÉ	5.1 TITLE			Change	Addition
TITLE					I	ı		-	
					5.2 NAME	1			
NAME	s				5.2 NAME 5.3 STREET	ADDRESS	•		
NAME STREET ADDRESS CITY-ST-ZIP	S						•		
NAME STREET ADDRESS CITY-ST-ZIP	S] DELETE	5.3 STREET			Change	☐ Addition
NAME STREET ADORESS CITY-ST-ZIP TITLE	S] DELETE	5.3 STREET			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			C] DELETE	5.3 STREET. 5.4 CITY-ST- 6.1 TITLE 6.2 NAME	ZIP	· .	☐ Change	☐ Addition
NAME STREET ADDRESS] DELETE	5.3 STREET. 5.4 CITY-ST- 6.1 TITLE	ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition

SIGNATURE:

813-969-0582