PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S35586

1. Corporation Name

| Principal Place of Business | Mailing Address |
|-----------------------------|--------------------------|
| 11902 WATERWOOD DR. | 11902 WATERWOOD DR. ' |
| BOCA RATON FL 33428-1026 | BOGA RATON FL 33428-1026 |

FILED Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90103 004 ***150.00

| L&R ME | DICAL ASSOCIATES, INC. | | | | | | | |
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| Principal Plac | e of Business | Mailing Address | | | | -{ | Binii Ribii B | NU BINTI NINI INDI |
| Principal Place of Business Mailing Address 11902 WATERWOOD DR. 11902 WATERWOOD DR. | | | DB · · | | | | - | |
| BOCA RATON FL 33428-1026 BOCA RATON FL 33428-1026 | | | | | | | | |
| | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | • | | | | 3. Date Incorporated or Qualifed 02/27/1991 | | · |
| 2 Principal P | Place of Business | 2a. Mailing Address | ——— | | | 4. FEI Number | | Applied For |
| 21 | 200 01 22011000 | 26 | | | | 65-0249630 | | Not Applicable |
| Suite, Apt. | . #, etc. | Suite, Apt. #, etc | | | | 5. Certificate of Status Desired | \$8.7 | 5 Additional |
| 22 | | 27 | | | | 3. Certificate of States Besiden | Fee | Required |
| City & State City & State | | | | | 6. Election Campaign Financing | • | 00 May Be | |
| 23 | | 28 | | Trust Fund Contribution Country 8 This corporation owes the co | | Trust Fund Contribution | Added to Fees | |
| Zip | Country | Zip | | untry | | 8. This corporation owes the current year I Personal Property Tax. | ntangible Yes | No |
| 24 | 25 9. Name and Address of Curre | 29 | 30] | T- | | 10. Name and Address of New Registere | | |
| | s. Name and Address of Ourie | in Registered Agent | | 81 | Name | 19. 10. | <u></u> | |
| WO | RLDWIDE CORPORATE SERVICE | es inc | | | | | | |
| 1 Fl | NANCIAL PLAZA | | | 82 | Strøet Addre | ess (P.O. Box Number is Not Acceptable) | | |
| _ | TE 2626 | | | 83 | | रहाँ कि कि बहु है है है। | | 313073151111 |
| FT L | Lauderdale fl 33394 | | | | | | ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;; | 建筑型高校设施。 2004年 |
| | | | | 84 | , | F | _ 1 - 1 | ip Code |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508, Florida S | Statutes, the | DOVE | -named corpo | pration submits this statement for the purpose on's board of directors. I hereby accept the app | of changing | its registered |
| office or i | registered agent, or both, in the State | e of Florida. Such change v ations of. Section 607.0505 | vas authorize 5. Florida Sta | d by tutes. | the corporatio | on's board of directors, I hereby accept the app | ointment as | registered |
| | | | , | | | | | |
| SIGNATURE | Signature, typed or printed name of registered ag- | ent and title if applicable. | (NOTE: Registere | d Agen | t signature required | s when reinstating) DATE | | |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE | PD | ☐ DELET | | ITLE | | | ☐ Chan | ge |
| NAME | LATRAVERSE, DAVID J | | | IAME | | • | | |
| STREET ADDRESS | 1 | | | | ADDRESS | | | • |
| CITY-ST-ZIP | BOCA RATON FL | ☐ DELE1 | | XTY-ST | T-ZIP | | Chan | ge ☐ Addition |
| TITLE | ANIDDES (ANDV) DIVERO | □ nerei | 1 | | ļ | | | ge |
| NAME | ANDRES (ANDY) RIVERO | | | AME | ADDDEDE | | | |
| STREET ADDRESS | VERO BEACH FL | | | | ADDRESS | | - | } |
| CITY-ST-ZIP TITLE | VERO DEACTTE | ☐ DELE | | TITE | 1-20 | | Chan | ge [] Addition |
| NAME | 1 · | | | AME | ļ | | | |
| STREET ADDRESS |) · | | 1 | | ADDRESS | | | tari yan |
| CITY-ST-ZIP | " | | | CITY-S | 1 | | : , 7 | |
| TITLE | | | | | | | | ge Addition |
| _ | 1 | ☐ DELE1 | E 41T | III | | | 🕝 🖸 Chan | |
| | | ☐ DELE1 | 1 | VAME | ł | क्षा राज्य स्थानको स्थ | r 🖸 Chan | Ì |
| St ZIP | | ☐ DELET | 4.21 | NAME | ADDRESS | | r 🕜 Chan | } |
| | | [] DELET | 4.21 | NAME | 1 | | r ⊡ Charl | |
| | | ☐ DELE1 | 4.21 43 S 4.4 C | VAME TREET | 1 | | r ⊡ Chan | ge 🗍 Addition |
| | | | 4.21 43 S 44 C | NAME TREET | 1 | | | ge 🔲 Addition |
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| TO ADDRESS | | ☐ DELE1 | 4.21 43 S 4.4 C FE 5.1 T 5.2 N 5.3 S 5.4 C | TREET TITLE TAME TREET TITLE TAME TREET | r-ZIP ADDRESS | | Chan | |
| | | | 4.21 43 S 4.4 C FE 5.1 T 5.2 N 5.3 S 5.4 C | TREET TITLE TAME | r-ZIP ADDRESS | | | |
| | | ☐ DELE1 | 4.21 438 440 (E 5.11 52N 538 540 | TREET TITLE TAME TREET TITLE TAME TREET | r-ZIP ADDRESS | | Chan | |
| | | ☐ DELE1 | 4.21 43S 44C 5.1T 5.2N 5.3S 5.4C FE 6.1T 6.2N | NAME TREET TILE TAME TREET TILE TREET TILE TAME | r-ZIP ADDRESS | | ☐ Chan | ge Addition |
| ST-ŻIP | | ☐ DELE1 | 4.21 43S 44C 5.1T 52N 53S 54C 6.1T 62N 63S | NAME TREET TILE TAME TREET TILE TREET TILE TAME | T-ZIP ADDRESS T-ZIP ADDRESS | | ☐ Chan | ge Addition |

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 received truese 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 attraction of the corporation or the corporation of the corporation

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