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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Principal Place of Business

1400 S. ORLANDO AVENUE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

S47488

(9)

1400 S. ORLANDO AVENUE

Mailing Address

NEUROLOGY AND ELECTROMYOGRAPHY CONSULTANTS, P.A.

SUITE 301 SUITE 301 WINTER PARK FL 32789 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32789 3. Date Incorporated or Qualified 05/01/1991 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 26 59-3061928 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z_{\rm ID}$ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 30 29 Personal Property Tax due June 30. g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OPPEHNEIM, RONALD E. 1400 S. ORLANDO AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 801 83 WINTER PARK FL 32789 84 Zip Code City 11. 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 607.0505, Florida Statutes. SIGNATURE (NO1E_Registered Agent signature required when reinstating) Signature, typed or printed name of registered reject and fille if apply able 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition OPPENHEIM, RONALD E. NAME 1.2 NAME 1400 S. ORLANDO AVENUE STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 1111.8 Change Addition GEBEL, MICHAEL A. 2.2 NAME 1400 S ORLANDO AVE STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DFLETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELC1E TITLE 4.1 TITLE ☐ Change Addition

4.2 NAMI

51 THILE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

14. Thereby 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 tempowered 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 attacky tent with an address.

Change

Change

Addition

Addition

FILED

May 05 1998 8:00am

Secretary of State