

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 26 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V18242** (0)
1. Corporation Name
JOSE M. VALDIVIA JR. MD, P.A.

Principal Place of Business
**1680 MICHIGAN AVENUE
SUITE 1016
MIAMI BEACH FL 33139**

Mailing Address
**1680 MICHIGAN AVENUE
SUITE 1016
MIAMI BEACH FL 33139**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1680 MICHIGAN AVENUE Suite, Apt. #, etc. 22 SUITE 1016 City & State 23 MIAMI BEACH FLA. Zip 24 33139 Country 25 USA		2a. Mailing Address 26 1680 MICHIGAN AVE Suite, Apt. #, etc. 27 SUITE 1016 City & State 28 MIAMI BEACH FL Zip 29 33139 Country 30 USA		3. Date Incorporated or Qualified 03/02/1992	3a. Date of Last Report 04/10/1996	FEI Number 65-0330911	Applied For Not Applicable
				5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required		
				6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees		
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent VALDIVIA, JOSE M., JR 2801 S.W. 128TH AVE. MIAMI FL 33175				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	☐ Change ☐ Addition
NAME	VALDIVIA, JOSE M., JR	1.2 NAME	
STREET ADDRESS	2801 S.W. 128TH AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	VALDIVIA, JOSE M., JR	2.2 NAME	
STREET ADDRESS	2801 S.W. 128TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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] **08/22/97** **2051534850**

CR2E034 (4/97)