

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 # 495051

1. Corporation Name

PULMONARY GROUP OF SOUTH FLORIDA, P.A.

Principal Place of Business

7000 S.W. 62ND AVE.
SUITE 201
SOUTH MIAMI FL 33143
US

Mailing Address

7000 S.W. 62ND AVE.
SUITE 201
SOUTH MIAMI FL 33143
US

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90017 049 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1976

4. FEI Number

59-1664154

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 the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

BREIER, ROBERT G
1320 SOUTH DIXIE HWY SUITE 830
CORAL GABLES, FLORIDA
33146

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

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

OFFICERS AND DIRECTORS

12. TITLE VP ☐ DELETE

NAME GIDEL, LOUIS T
STREET ADDRESS 7000 SW 62ND AVE SUITE 201
CITY-ST-ZIP SOUTH MIAMI FL

TITLE PRES ☐ DELETE

NAME PARKER, R LATANAE
STREET ADDRESS 7000 SW 62ND AVE. SUITE 201
CITY-ST-ZIP SOUTH MIAMI FL

TITLE SECT ☐ DELETE

NAME PETUSEVSKY, MITCHELL L.
STREET ADDRESS 7000 SW 62ND AVE. SUITE 201
CITY-ST-ZIP SOUTH MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP ☐ Change ☐ Addition

1.2 NAME MARK J. HAUSER
1.3 STREET ADDRESS 7000 SW 62ND AVE SUITE 201
1.4 CITY-ST-ZIP SOUTH MIAMI, FL 33143

2.1 TITLE VP ☐ Change ☐ Addition

2.2 NAME JEREMY I TABAK
2.3 STREET ADDRESS 7000 SW 62ND AVE SUITE 201
2.4 CITY-ST-ZIP SOUTH MIAMI FL 33143

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 as an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/99

Date

305-661-9404

Daytime Phone #

CR2E034 (1/98)