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**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **G58545**

1. Corporation Name

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90301 044 \*\*\*150.00

| 1 1 1 1 1 1   | 1. WENDSCHUH, M.D., P.A   | •  |  |                                   |   |  |                                 |  |                      |
|---|---|--|--|-----------------------------------|---|--|---------------------------------|--|----------------------|
| . — .   |   |  |  |                                   | L I <b>sl</b> ehit <b>aar</b> t <b>e</b> ri <b>a</b> l t <b>a</b> | HER BURN BREDON BUR BRED E                   | (O) CIAN EER                    |  |                      |
|   | •   |  |  |                                   |   |  |                                 |  |                      |
| Principal Place   | e of Business   | Mailing Address  |  |                                   | r 1880us 8881 81581 18  | CE: EIIII EIFF (CI) DIDII D                  | ".<br>Helt einst breit (        | esate Alan Idai                                    |                      |
| 7000 SW 62 AV   |   | 7000 SW 62 AVE   |  |                                   | 1.5   |  |                                 |  |                      |
| \$320   | 7, 2-4  | \$320  |  | 1                                 | DO M  | OT WOITE IN THIS                             | CDACE                           |  |                      |
| S MIAMI FL 33   | 143   | S MIAMI FL 33143   |  |                                   |   | OT WRITE IN THIS                             | SPACE                           |  |                      |
| บร  |   | US   |  |                                   | Date Incorporated or (  | Quaired                                      |                                 |  |                      |
|   |   | 2 Maritian Address   |  |                                   | 08/31/1983<br>FEI Number  |  | 1 1 1                           | plied For  |                      |
| <u> </u>  | lace of Business  | 2a. Mailing Address  |  |                                   | 59-2324464  |  | ·                               | ot Applicable                                      |                      |
| 21  | #   | Suite, Apt. #, etc.  |  | <del></del>                       | 35-2324404  |  | \$8,75                          |  |                      |
| Suite, Apt.   | #, etc.   | 27   |  | 5.                                | Certificate of Status De  | esired 🗌                                     |                                 | equired  |                      |
| City & State  | ··  | City & State   | •  | - 6                               | Election Campaign Fir   | nancing                                      | \$5.00                          | May Ro   |                      |
| 23  |   | 28   |  |                                   | Trust Fund Contribution   |  |                                 | to Fees  |                      |
| Zip   | Country   | Zip  | Country  |                                   | This corporation owes   |  | angible                         |  |                      |
| 24  | 25  | <u> </u>   | 30   |                                   | Personal Property Tax   | -  | Yes                             | □No  |                      |
| 1   | 9. Name and Address of Curren   | nt Registered Agent  |  | 10.                               | Name and Address  | of New Registered                            | Agent                           |  |                      |
|   |   |  | 81 Nan   | e LIBA                            | DSCHUH  | PETER  | z H.                            | .MD  |                      |
|   | IDSCHUH, PETER H., M.D.   |  | 82 Stre  | et Address (P.                    | O. Box Number is Not  | (Acceptable)                                 | 70,                             | 1111   |                      |
|   | SW 62 AVE   |  |  | 1000                              | SW  | 620  | 178_                            |  |                      |
| \$300   |   |  | 83   | 5000                              | 2 82 0  |  |                                 |  |                      |
| S M   | IAMI FL <sub>.</sub> 33143  |  | 84 City  |                                   |   |  | 85 Zip.                         | Code 1/2   |                      |
|   |   |  | 104 City   | $\subseteq IV$                    | 11 <del>/1</del> /11  | FL   | .   " 33                        | 145  |                      |
|   |   |  | \$ I   | <i></i>                           | • • • • • • •   |  |                                 |  |                      |
| 11. Pursuant  | to the provisions of Sections 607 050   | 2 and 947.1508, Florida Statute  | s, the above-nam   | ed corporation                    | submits this statemen   | ot for the numose of                         | changing its                    | registered   |                      |
| 11. Pursuant office or n  | to the provisions of Sections 607 050<br>egistered agent, or both, in the 51 to<br>m familiar with, and accept the object   | of Florida, Such change was at   | ithorized by the co  | ed corporation<br>rporation's boa | submits this statement<br>and of directors. I here                | ot for the numose of                         | changing its<br>ntment as re    | registered<br>gistered                             |                      |
| agent.la  | to the provisions of Sections 607 050<br>egistered agent, or both, in the starts<br>of familiar with, and accept the object | of Fibrida Such Charge was at<br>Mors of Seepon  | ithorized by the co<br>ida Statutes.   | rporation's boa                   | ard of directors. I here  | nt for the purpose of<br>by accept the appoi | changing its<br>ntment as re    | registered<br>gistered                             |                      |
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| agent. 1 a SIGNATURE 12.  | m familiar with, and accept the condi-  | of Profide Such Charling was at Mors or Special Profile Was at Mors of Special Profile Was at Mors of Special Profile Was at Morse Was  | othorized by the collida Statutes.  Registered Agent signatures.   | rporation's boa                   | ard of directors. I here  | nt for the purpose of<br>by accept the appoi | ND DIRECTO                      | DRS IN 12  | 1100)                |
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| agent. 1 a SIGNATURE  12.  TITLE  NAME  | Signature, typed or writes after gregories AN P WENDSCHUH, PETER H  | of Profide Such Charling was at Mors or Special Profile Was at Mors of Special Profile Was at Mors of Special Profile Was at Morse Was  | Registered Agent signate  13.  1.1 TITLE  1.2 NAME   | re required when re               | ard of directors. I here  | nt for the purpose of<br>by accept the appoi | ND DIRECTO                      | DRS IN 12  | 034 (44,00)          |
| agent. 1 a SIGNATURE  12.   | Signature, typed or phites the gregistery age: OFFICERS AN P WENDSCHUH, PETER H 10700 SW 98TH CT                            | of Profide Such Charling was at Mors or Special Profile Was at Mors of Special Profile Was at Mors of Special Profile Was at Morse Was  | Registered Agent signate  13. 1.1 TITLE 12 NAME 1.3 STREET ADDRE   | re required when re               | ard of directors. I here  | nt for the purpose of<br>by accept the appoi | ND DIRECTO                      | DRS IN 12  | DE024 (44/08)        |
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inal time 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 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 of time corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 13 if changed, or on an attachment with a saddings, with all the proposed of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information can be 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 can be 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 can be 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 can be supplied with the information can be 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 can be supplied with the information can be supplied