

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 467900

(7)

1. Corporation Name

KENNETH RATZAN, M.D., P.A.



Principal Place of Business

4300 ALTON RD.  
MIAMI BCH FL 33140

Mailing Address

4300 ALTON RD.  
MIAMI BCH FL 33140

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/16/1974

3a. Date of Last Report

01/31/1995

4. FEI Number

59-1568228

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 has liability for intangible tax under s. 189.032,  
Florida Statutes

☒ Yes ☐ No

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. 25.

29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RATZAN, M.D., KENNETH R.  
4300 ALTON ROAD  
MIAMI BEACH FL 33140

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 607.1506, 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 of Registered Agent (if not the same as the person filing)

Signature of Registered Agent (if not the same as the person filing)

Signature of Registered Agent (if not the same as the person filing)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

1. TITLE ☐ Change ☐ Addition

NAME  
PSD  
RATZAN, KENNETH  
4300 ALTON RD.  
MIAMI BCH FL

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2. TITLE

2. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

3. TITLE

3. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

4. TITLE

4. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

5. TITLE

5. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

6. TITLE

6. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/96 305-674-2866

CR2E034 (12/95)