FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

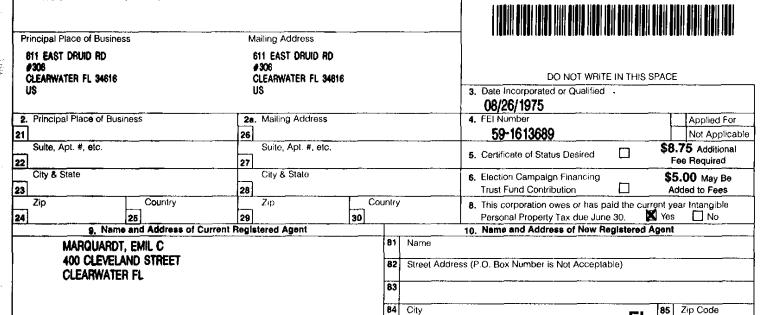
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

MOSHE KEDAN, M.D., P.A.

FILED
Jan 29 1998 8:00am
Secretary of State



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 ar	m familiar with, and accept the obligations of	of, Section 607.05 05 , Flo	orida Statutes.				
SIGNATURE .	Signature, typed or printed name of registered agent and titl	e (Lapplicable. (NOT)	: Registered Agent signature require	ed when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS				S/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 TITLE		Change	Addition	
NAME	KEDAN, MOSHE		1.2 NAME				
STREET ADDRESS	611 EAST DRUID RD #306		1.3 STREET ADDRESS				
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY - ST - ZIP				
TITLE	V	DELETE	2.1 TITLE		☐ Change	Addition	
NAME	KEDAN, ELLA		2.2 NAME				
STREET ADDRESS	611 EAST DRUID RD #308		2.3 STREET ADDRESS				
CITY-ST-ZIP	CLEARWATER FL		2. 4 CITY - ST - ZIP				
TITLE	ST	DELETE	3.1 TITLE		☐ Change	Addition	
NAME	MARQUARDT, EMIL C		3.2 NAME				
STREET ADDRESS	845 INDIAN ROCKS ROAD		3.3 STREET ADDRESS				
CITY-ST-ZIP	Be lleair fl		3.4. CITY - ST - ZIP				
TITLE		DELETE	4.1 TITLE		☐ Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 City - St - ZiP				
TITLE		☐ DELETE	5.1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-7IP				
TITLE		☐ DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				

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 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 unique address.