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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1998

(7)

MICHAEL H. GORDON M.D., P.A.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
2001 NORTHEAST 48TH COURT 2001 NORTHEAST 48TH FT LAUDERDALE FL 33308 FT LAUDERDALE FL 333						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 09/01/1975		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For		
21 26						59-1617075 Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			-			5. Certificate of Status Desired Section 5. Section 5. Section 5. Section 6.		
City & 23	State City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip 29	Gountry 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XY Yes No		
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Registered Agent		
	GORDON, MICHAEL H			81	Name			
2001 NORTHEAST 48TH COURT FT LAUDERDALE FL 33308				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
	TT BIODENDALE TE 00000			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 subnoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of						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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATU	IRF	•						
Oldivalo	Signature, typed or printed name of registered	d agent and title if applicable (I	NOTE Registere	d Age	ent signature re	required when reinstaling) DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 79	†LE		Change L Addition		
NAME	GORDON, MICHAEL H		1.2 N	1.2 NAME				
STREET ADDR			1.3 \$	1.3 STREET ADDRESS				
CITY-ST-ZIP					T-ZIP			
TITLE	ST	☐ DELETÉ	2.1 (1	TLE		L Change L Addition		
NAME	GORDON, MICHAEL H		2.2 N	2.2 NAME				
STREET ADDR			2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP			2.40	2. 4 CITY-ST-ZIP				
TITLE	1	☐ DELET e	3.1 TITLE			Change Addition		
NAME			3.2 N	AME	1			
STREET ADDR	REET ADDRESS		3.3 \$	3.3 STREET ADDRESS				
CITY-ST-ZIP				3.4. CITY-ST-ZIP				
TITLE				TLE		Change Addition		
NAME			4.2 N	AME	ļ			
STREET ADDR	ESS		4.3 \$7	REET	ADDRESS			
CITY-ST-ZIP			4.4 C	TY-S	T-ZIP			
TITLE	DELETE		5.1 TI	5.1 TITLE		☐ Change ☐ Addition		
NAME			5.2 N	ME				
STREET ADDR	ESS		5.3 \$1	REET	ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 C	TY-S	T-ZIP			
TITLE DELETE			6.1 TI	6.1 TITLE		Change Addition		
NAME			6.2 N	ME				

CITY-ST-ZIP 14. I hereby certify that the information supplied with this fiting 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 of an attachment with all address.

6.3 STREET ADDRESS

STREET ADDRESS