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PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #

101

	Y AND MOEBUS, M.D.'S,	The state of the s						
ncipal Place 4685 PONCE	DE LEON BLVD	Mailing Address 4685 PONCE DE LEO	ON BLVD					
SUITE 102	150 Ft 80146	SUITE 102	****					
CORAL GABLES FL 33146		CORAL GABLES FL 33146			3. Date Incorporated or Qualified 3a. Date of Last Report			
Principal Pla	ace of Business	2a. Mailing Address			10/01/1975 4. FEt Number		04/27/19	
T To Ton Ton To	iso or erections	26. Walling Address			59-1620933			Applied For Not Applicable
Suite, Apt. #	r, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.7	5 Additional
City & Stale		City & State			C Clastica Compaign Financia			Required
		28			6. Election Campaign Financing Trust Fund Contribution			May Be d to Fees
Ζφ	Country	Ziρ	Countr	У	B. This corporation has liability f		tax under s	199.032
	25 9. Name and Address of Curre	29 29 29 29 29 29 29 29 29 29 29 29 29 2	[30]		Florida Statutes (A)	res 🔲 No	Agent	
	V .		81	Name	(U. realité blie Address et les	i riogiaterou	Agent	
ROBERT	r G. Breier		82	Ct Add	(D.O. Boy Number is Not Asses	table)		
	DIXIE HWY		04	Street Add	iress (P.O. Box Number is Not Accep	iadie)		
SUITE 8	30		83					,
CORAL	GABLES FL 33146		84	City		Fl	85 Z	ip Code
Pursuant to	o the provisions of Sections 607,050 ed agent, or both, in the State of Flor	rida. Such change was authoriz	tes, the above	named corpo	oration submits this statement for the	numage of ch	nanging its	registered officed agent. I am
familiar with	h, and accept the obligations of Sec	ction 607.0505. Étorida Statutes	s	portation b boc	and on an ectors. Thereby accept the a		•	
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SIGNATURE: SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/23/96

(305) 666-3967