

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 17 PM 12:00

DOCUMENT # 491172 (3)

1. Corporation Name  
FERNANDO T. ORTIZ, M.D., P.A.

Principal Place of Business: 17102 S.W. 78TH PLACE MIAMI FL 33157  
Mailing Address: 17102 S.W. 78TH PLACE MIAMI FL 33157

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/04/1976  
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business  
21 State, Apt. #, etc.  
22 City & State  
23 Zip Country  
24 Zip Country  
25 Country  
26 State, Apt. #, etc.  
27 City & State  
28 Zip Country  
29 Zip Country  
30 Country

4. FEI Number: 59-1649693  
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. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

FERNANDO, ORTIZ  
17102 SW 78TH PLACE  
MIAMI FL 33157

10. Name and Address of New Registered Agent

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 607.1508, 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Agent or principal officer of registered agent and title if applicable)

(Signature of Agent (signature required after nomination))

DATE

12. OFFICERS AND DIRECTORS

1. TITLE: PD  
NAME: ORTIZ, FERNANDO T.  
STREET ADDRESS: 17102 S.W. 78TH PLACE  
CITY, ST, ZIP: MIAMI FL 33157  
2. TITLE: D  
NAME: FLOR, REMIGIO J  
STREET ADDRESS: PO BOX 650398 N/A  
CITY, ST, ZIP: MIAMI FL  
3. TITLE: D  
NAME: AGUAS, PEDRO  
STREET ADDRESS: 9021 SW 102 ST  
CITY, ST, ZIP: MIAMI FL 331  
4. TITLE:  
NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:  
5. TITLE:  
NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:  
6. TITLE:  
NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: PD  
NAME: ORTIZ, FERNANDO T.  
STREET ADDRESS: 17102 SW 78 PLACE  
CITY, ST, ZIP: MIAMI, FL. 33157  
Change  Addition   
2. TITLE: D  
NAME: FLOR, REMIGIO J  
STREET ADDRESS: 12335 SW 45th  
CITY, ST, ZIP: MIAMI, FL 33175  
Change  Addition   
3. TITLE: D  
NAME: AGUAS, Pedro  
STREET ADDRESS: 9021 SW 102 st.  
CITY, ST, ZIP: MIAMI, FL 33176  
Change  Addition   
4. TITLE: Change  Addition   
5. TITLE: Change  Addition   
6. TITLE: Change  Addition   
7. TITLE: Change  Addition   
8. TITLE: Change  Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), Florida Statutes. Further, I 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. I am an officer or director of the corporation or the person or persons authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes, or on an attachment with an address.

SIGNATURE: *Fernando T. Ortiz* Fernando T. Ortiz, M.D. 1/7/95 305-233-4362  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR