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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 503027

LADIA & LADIA, M.D.'S, P.A.

FILED Jan 26, 1999 8:00am **Secretary of State**

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Principal Plac	e of Business	Mailing Address			I LAMISAL STATE DOING THE ONLINE HOUR SAME DEP	12 B1841 B1811 81811 B1	DAL MINIT SERI
208 N.E. 19TH	DR.	208 N.E. 19TH DR.					
SUITE 5 OKEECHOBEE FL 34972-1911 OKEECHOBEE FL 34972-191					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	IIS SPACE	,
•					· '		.
2. Princinal P	lace of Business	2a. Mailing Address	s s		05/12/1976 4. FEI Number	App	lied For
24		26			59-1661515	<u> </u>	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, et	tc.			\$8.75 A	
22	.,	27			5. Certificate of Status Desired	Fee Rec	
City & Stat	8	City & State			6. Election Campaign Financing	\$5.00	May Be
23	<u> </u>	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country		8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent	
	The state of the s			81 Name			
LADI	A, FELIPE P., M.D., P.A.			82 Street Add	dress (P.O. Box Number is Not Acceptable)	-	
	N.E. 19 DRIVE			July Street Had	in the contract of the contrac		Fred or 1 (upp
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OVE				OH City	F	L	bue
UNE	- In	n.,		4 1			
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida	Statutes, the	above-named cor	poration submits this statement for the purpose	of changing its r	egistered
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida! Such change	was authorize	ed by the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate the purpose in the p	of changing its r pointment as reg	egistered istered
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14. I hereby 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 an address, with all other like empowered.