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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 19, 1999 8:00 am Secretary of State 02-19-1999 90130 042 \*\*\*150.00

DC	CI	IMEN	JT	#	5091	ING
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1. Corporation Name

TERENCE J. MATTHEWS, M.D., P.A.

, CHILINO	E G. MINTINEWO, WILD IT I'V							
Principal Place	of Business	Mailing Address				1 (Satisfied and Satisfied and		
4800 N FEDERAL HIGHWAY 4800 N FEDERAL HIGHWAY								
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308						DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualifed		
						06/29/1976		· · .
2, Principal P	ace of Business	2a. Mailing Address	-			4. FEI Number		plied For
21		26				59-1676948		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 A	
22		27					Fee Red	. <u>.</u>
City & State	e .	City & State				6. Election Campaign Financing	\$5.00 t Added to	
23		28	Carrat			Trust Fund Contribution		) Lecs
Zip	Country	Zip	Count	ıу		This corporation owes the current y     Personal Property Tax.	/ear mangible ☐ Yes	□No
24	9. Name and Address of Current	1	30		-	10. Name and Address of New Regis		
	y. Name and Address of Current	Registered Agent	8	11 N	Name			
MAT	THEWS, TERENCE J.					(D.O. D. M. L. is Man Associable)		<u></u>
	N FEDERAL HIGHWAY		8	32 5	Street Addre	ess (P.O. Box Number is Not Acceptable)		
-	AUDERDALE FL 33308		8	33				
			<u> </u>				85 Zip C	`ode
	1				City	oration submits this statement for the purp	FL   /	
SIGNATURE	$(\lambda M)/(M)$	D DIRECTORS	Registered A	gent sk		oration submits this statement to the popular's board of directors. I hereby accept the when reinstating)  ADDITIONS/CHANGES TO OFFICE	DITE /	
TITLE	PTD	☐ DELETE	1.1 TITL			•	□ Ollange	
NAME	MATTHEWS, TERENCE		1.2 NAM					
STREET ADDRESS	41 CAYUGA ROAD		1.3 STRI					
CITY-ST-ZIP	SEA RANCH LAKES, FL33308	☐ DELETE	1.4 CITY		IP		☐ Change	Addition
TITLE		רין מברבוב	2.1 TITU 2.2 NAM			• • • • • • • • • • • • • • • • • • • •		
NAME			2.3 STR		NDESS	·		Ì
STREET ADDRESS			2.4 CIT					
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITL		<u> </u>	-	☐ Change	☐ Addition
NAME		_	3.2 NAM		ļ		•	
STREET ADDRESS			3.3 STR		ODRESS			
CITY-ST-ZIP			3.4. CIT	Y-ST-Z	ZiP			
TITLE	-	☐ DELETE	4.1 TITL	E			☐ Change	☐ Addition
NAME			4. 2 NAM	ME				
STREET ADDRESS			4.3 STR	EET AL	DORESS			
CITY-ST-ZIP			4.4 CITY	/-ST-Z	IP	·		
TITLE		☐ DELETE	5,1 TITL			•	☐ Change	Addition ]
NAME			5.2 NAM			,	•	
STREET ADDRESS	\$ \$4				DDRESS			
CITY-ST-ZIP	1 1		5.4 CITY		ZIP		☐ Change	☐ Addition
TITLE	N 1	☐ DELETE	6.1 TITL				∟ Gitange	, ()(0,00)(1
NAME			6.2 NAM		DDRESS			
CTREET ADDRESS	4		0.3 S I K	CEIAL	DUNE33			•

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 supplier that 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 true employeed to execute this report as required by Chapter 607, Florida Statutes; and that my same appears in Block 12 or Block 13 if changed, or or an attacylingent with an address, with all other like employeed. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS