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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 513638 (7)

FLORIDA WOMEN'S MEDICAL CLINIC, INC.

FILED Mar 18 1998 8:00am Secretary of State

		•. · · · · · • · · · · · · · · · · · · · · · · · 		 		IDIA DADIA DABIK DEDIL BIDIA 1881
Principal Place	e of Business	Mailing Address				
2331 N SR 7		2331 N SR 7				
104 FT LAUDERDA	N F FL 39313		STE - 104 FT LAUDERDALE FL 33313		DO NOT WRITE IN THIS SPACE	
US	APE 15 00019	US			3. Date Incorporated or Qualified	
· ·					09/20/1976	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	26		59-1688608	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	6	h	City & State		8. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	7ip	Z(p) Country		Trust Fund Contribution	Added to Fees
24	25	29	30	' '	 This corporation owes or has paid the of Personal Property Tax due June 30. 	Yes No
241	9. Name and Address of Curr		1901		10. Name and Address of New Registers	
TAI	RNOW, JOYCE		8	1 Name		
	31 N SR7		8	2 Street Add	2 Street Address (P.O. Box Number is Not Acceptable)	
	E - 104				Gross (1.0. Dox 140/100) is 140/1000ptable)	
FT	LAUDERDALE FL 33313		8	3		
			8	4 City		85 Zip Code
			- 1	1 7	F	L `` `
11. Pursuant office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607.1508, Florida Statu He of Florida: Such change was	utes, the abo authorized I	ve-named cor by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered ppointment as registered
agerit. I a	m familiar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statut	es.		''
SIGNATURE	Signature, typed or ponted name of registered	reserved must then discounts of the (MC)	VI Clariclared A	cont pignature cog	uired when reinstating) DATE	· · · · · · · · · · · · · · · · · · ·
12.		ND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	☐ DELFTE	1.1 TITLE			☐ Change ☐ Addition
NAME	TARNOW, JOYCE		1.2 NAM	E		
STREET ADDRESS	2331 N SR 7 - STE#104		1.3 STAE	ET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY	- ST - ZIP		
TITLE		☐ DELETE	21 TITLE			Change
NAME			2.2 NAM	E		
STREET ADDRESS				et address		
CITY-ST-ZIP		- Deverse	2 4 CITY			Change Addition
TITLE		☐ DELETE	31 7171.5			Li Change Li Addition
NAME			3 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			Change Addition
NAME		- Paralla	4. 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			4.4 CITY			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5 2 NAM	E		
STREET ADDRESS			5.3 STAE	et address		
CITY-ST-ZIP			5 4 CITY			
TITLE		DEFELE	61 TITLE			Change Addition
NAME			6 2 NAM	Ε		
STREET ADDRESS			6.3 STAE	ET ADDRESS		
CITY.ST. 7IP			6 A CITY	. ST. 7IP		

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 own attachment with an address.

SIGNATURE: