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

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SIGNATURE:

14. Thereby certify that the information supplied with this filing de-

Feb 18 1998 8:00am **PROFIT** CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 515073 VAN HOUTEN, ZANN, AND EIDELSON, M.D., P.A. Principal Place of Business Mailing Address 1401 NW 9TH AVE 1401 NW 9TH AVE **BOCA RATON FL 33486 BOCA RATON FL 33486** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/16/1976 2. Principal Place of Business 2a. Maring Address Applied For 21 26 59-1688155 Not Applicable Suite, Apt. #, ek Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees 23 Country Country ZiD B. This corporation owes or has paid the current oar Intangible Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent VAN HOUTEN, JOHN A 1401 NW 9TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33486** 83 11. Pursuant to the provisions of Sc. tions 607 0502 and 607.1508. Honda Statules, 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE (NOTE Engistered Agen' signature required whom reinstating) DATE CR2E034 (10/97 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 1000 NAME VAN HOUTEN, JOHN A. 1.2 NAMI 1401 NW 9TH AVE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CHTY-ST-ZIP 1.4 CITY - S1 - ZIP DELETE TITLE Change Addition ZANN, ROBERT B. NAME 1401 NW 9TH AVE STREET ADORESS **BOCA RATON FL** 2 4 CITY - ST - ZiP CITY-ST ZIF DELETÉ Change Addition TITLE 3.1 Table NAMi STREET ADDRESS 3.3 STREET ADDRESS CITY-ST ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THUE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST ZIP 5.4 CITY-ST-ZIP 🔲 DELETE Change Addition 61 TILLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

and qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information true and that my signature shall have the same legal effect as if made under oath; that I am an accordance to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in

A. VAN HOUTEN 2-13-98 561-395-573

FILED