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 # 515763

(1)

DR. JOHN J. MADONNA, P.A.

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 (40)31 01(8) 5588 91(1) 1893 91(1)	teli Rimis nensi	81811 BIG11 BI	911 61614 1881	
2833 N. OCEAN BLVD. 2833 N. OCEAN BLVD.										
SUITE 204		SUITE 204								
FT. LAUDERE	OALE FL 33308	FT. LAUDERDALE FL 3330				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified 10/04/1976				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		TA	applied For	
21		26	26			59-1691481		- I	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			-			Additional	
22		27	27			5. Certificate of Status Desired			Required	
City & Stat	6	City & State			· .—	6. Election Campaign Financing		\$5.00	May Be	
23		28	28			Trust Fund Contribution			to Fees	
Zip	Country Zip			iry		8. This corporation owes or has p	aid the cur	rent year Ir	ntangible	
24	25		30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Current	t Registered Agent				10. Name and Address of New R	egistered .	Agent		
RO RO	Senthal, Stuart S. ESQ.			81	Name					
633	,	<u>}</u>	82	Street Addre	Address (P.O. Box Number is Not Acceptable)					
FT.	LAUDERDALE FL 33301					radious (1.5. Box radiober 18 (16. Notopiable)				
			[+	83						
			i	B4	City			85 Zip	Code	
44 Pureupnt	to the provinings of Costings 507 0507	and CO7 1500 Florida Clatula	0.400.00		nomed seen	aration automita this statement for the	FL			
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, typed or printed name of registered ager			Agent	t signature require	ed when reinstating)	DATE			
12.	OFFICERS AND			_	<u> </u>	ADDITIONS/CHANGES TO OFFI	CERS AND			
TITLE	D Rosenthal, Stuart S.	☐ OFLETE	1.1 TITE					☐ Change	☐ Addition	
NAME	3101 N. FEDERAL HWY		1.2 NAM							
STREET ADDRESS	FT. LAUDERDALE FL				ADDRESS] i	
CITY-ST-ZIP	FI. DAUDERDALE FL	☐ DELET E	14 011		- 7IP			T 05	- I seems -	
TITLE	MADONNA, JOHN J.	FT DETEIG	21 TITL					☐ Change	Addition (
NAME	1516 E. LAS OLAS BLVD.		2 2 NAA							
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NAME			5.2 NAN						<u> </u>	
STREET ADDRESS					DDRESS					
CITY-ST-ZIP			5.4 CITY		ZIP					
TITLE		☐ DELETE	6.1 TITL	E				☐ Change	Addition	
NAME			6.2 NAN	4E					ļ	
STREET ADDRESS			6.3 STR	EET AI	DDRESS				ĺ	
CITY-ST-ZIP			6.4 CITY	-\$T-	ZIP					

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 13 if changed, or on an attachment with an address.

IONATURE.

1/12/08