

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

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 547625 (4)**  
1. Corporation Name  
**ISIDORO GUN, M.D., F.A.C.S., P.A.**

Principal Place of Business <b>555 S.W. 12th Avenue Suite 101 Pompano Beach, FL 33069</b>	Mailing Address <b>555 S.W. 12th Avenue Suite 101 Pompano Beach, FL 33069</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**09/26/1977**

2. Principal Place of Business 21 <b>404 E. Atlantic Blvd.</b>	2a. Mailing Address 26 <b>404 E. Atlantic Blvd.</b>
Suite, Apt. #, etc. 22 <b>Suite 101</b>	Suite, Apt. #, etc. 27 <b>Suite 101</b>
City & State 23 <b>Pompano Beach, FL</b>	City & State 28 <b>Pompano Beach, FL</b>
Zip 24 <b>33060</b>	Country 25
Zip 29 <b>33060</b>	Country 30

4. FEI Number  
**59-1767794**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**ROSENTHAL, STUART S.  
555 S.W. 12th Avenue  
Suite 101  
Pompano Beach, FL 33069**

10. Name and Address of New Registered Agent

81 Name  
**STUART S. ROSENTHAL, ESQ.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**404 East Atlantic Boulevard**

83  
**Suite 101**

84 City  
**Pompano Beach**

85 State  
**FL**

86 Zip Code  
**33060**

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]* **STUART S. ROSENTHAL, ESQ.** **4-13-98**  
Signature (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>GUN, ISIDORO M.D.</b>	
STREET ADDRESS	<b>7421 N. UNIVERSITY DRIVE</b>	
CITY-ST-ZIP	<b>TAMARAC, FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	<b>40000243275</b>
63 STREET ADDRESS	<b>-04/17/98--01102--021</b>
64 CITY-ST-ZIP	<b>***150.00</b>

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

SIGNATURE *[Signature]* **ISIDORO GUN, PRESIDENT** **4/7/98** **954-722-1020**

CR2E034 (10/97)