

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 23, 1999 8:00 am
Secretary of State

09-23-1999 90006 048 ***550.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 549406

1. Corporation Name
 A. RAZZAK TAI, M.D., P.A.



Principal Place of Business: 4316 TIDEWATER DRIVE SUITE A ORLANDO FL 32812 US
 Mailing Address: 4316 TIDEWATER DRIVE SUITE A ORLANDO FL 32812 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 10/15/1977

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

4. FEI Number: 59-1772243
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property: Yes No

9. Name and Address of Current Registered Agent
 TAI, ABDUR RAZZAK
 595 OAK COMMONS BLVD
 SUITE A
 KISSIMMEE FL 34741

10. Name and Address of New Registered Agent
 81 Name: Abdur Razzak Tai
 82 Street Address: 4316 Tidewater Drive
 84 City: Orlando FL 85 Zip Code: 32812

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS
 TITLE: PST
 NAME: TAI, A RAZZAK
 STREET ADDRESS: 595 OAK COMMONS BLVD STE A
 CITY-ST-ZIP: KISSIMMEE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: PST
 1.2 NAME: Abdur Razzak Tai
 1.3 STREET ADDRESS: 4316 Tidewater Drive
 1.4 CITY-ST-ZIP: Orlando, FL 32812

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 in an attachment with an address.

SIGNATURE: A. Razzak Tai 9/14/99 407-932-3666
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/99)