COF ANNU	PROFIT RPORATION JAL REPORT 1996		Secr	PARTMENT C ra B. Morthan etary of State DE CORPORA	ni				
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•	AEL J. HAIMO, M	.D., P.A.				18 8/6/ S/112 G1124 G11(1 23 /41 6186 1 Bill Alb er 6 2/	en kiki kiki kibi bibi bibi	ıı 1 86 1
rincipal Place	of Business		Mailing Address						
PHYSICIAN'S PAVILLION, SUITE 210 7421 NORTH UNIVERSITY ORIVE TAMARAC FL 33321			PHYSICIAN'S PAVILLION. SUITE 210 7421 NORTH UNIVERSITY DRIVE TAMARAC FL 33321			Date Incorporated or Qualified			
Principal Pt	ace of Business		a. Mailing Address			01/01/1978		e of Last Report 14/06/1995	
		26				4. FEI Number 59-1819465		Applied Not App	
Suite, Apt		27	Suite, Apt. #, etc			5. Certificate of Status De	esired	\$8.75 Addition	
City & State		28	L			6. Election Campaign Fina Trust Fund Contribution	·	\$5.00 May I Added to Fee	
Zip	Count 25 9. Name and Addr	ry 29 ess of Current Regi		Coun	try	This corporation has lia Florida Statutes Name and Address of	☐ Yes ☐ No	ax under s 199.03	
HAIMO				6	Name	To, Name and Address o	n New Registered	Agent	
HAIMO, MICHAEL J. PHYSICIAN'S PAVILLION, SUITE 210 7421 NORTH UNIVERSITY DRIVE TAMARAC 33321				8	Street Add	iress (P.O. Box Number is Not A	Acceptable;		
7421 NO	orth University (E	13				
7421 NC TAMARA Pursuant to or registere familiar with	ORTH UNIVERSITY (AC 33321	ions 607.0502 and 6	07.1508, Florida Statu h change was authori 0505, Florida Statute	ites, the above	14 City	ration submits this statement fo and of directors. I hereby accept	FL or the purpose of cha the appointment as	85 Zip Code anging its registered registered agent. I	d offic am
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