## 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 # 565322

(5)

FILED
May 04 1998 8:00am
Secretary of State

WILLIA	M DARBY GLENN III, M.D.,	P.A.			
Principal Plac	e of Business	Mailing Address		188101 01110 01101 01107 \$1610 11010 1687 61867 6	DII BIGIL 81011 DIBII DIBII 1881
7741 S W 62ND AVE 7741 S W 62ND AVE SOUTH MIAMI FL 33143 US US				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
9 Oringia of D	None of Dunings	1 6 44 7 - 4 (1)	·····	01/16/1978	
<b>└</b>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# alc	Suite, Apt. #, etc.		59-1793614	Not Applicable
22	w, 010.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e e	City & State		8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation ewes or has paid the o	eurrent year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Registere	d Agent
DARBY GLENN, WILLIAM III			B1 Name		
7741 SW 62ND AVE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SOUTH MIAMI, FL 33143			83		
33	143		63		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Continue 607 066	22 and 607 1609 Florido Statuta	the should person a pass	F	
office or r	egistered agent, or both, in the State	of Florida. Such change was a	uthorized by the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	opointment as registered
agent. La	m familiar with, and accept the oblig	lations of, Section 607.0505, Flo	rida Statutes.	·	
SIGNATURE	Signature, lyped or printed hame of requisived agr	out and title if are insale. (AIOL)	Registered Agent signature requi	red when reinstating) DATE	
12.		ID DIRECTORS	<b>I</b> 13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Darby Glenn, William III		1.2 NAME		
STREET ADDRESS	7741 SW 62ND AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	<b>\$</b> OUTH MIAMI, FL 00000		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		İ
STREET ADDRESS			23 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		☐ DELETÉ	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		III nei nee	3.4. CITY-ST-ZIP	***************************************	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change
TITLE		רו הנינוני.	5.1 TITLE		☐ Change ☐ Addition
NAME CTREET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	54 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		L taters	6.2 NAME		Countries Countries
STREET ADDRESS					
ļ			6.3 STREET ADDRESS		
CITY-ST-ZIP		21 0 7 12	6.4 CITY - ST - ZIP		

14. I hereby certify that the information supplied with this filling 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 reports 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 firustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or only in attachment with an hiddress.