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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

583679

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DOCUMENT #

LAZARO A. HERNANDEZ, M.D., P.A.

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	f Business	Mailing Address						
2309 W. MA SUITE 1 TAMPA FL 3	rtin Luther King Jr. Boulevard 19607	2309 W. MARTIN LU Suite 1 Tampa Fl 33607	THE KING JR	. BOULEVARD		4-2		
US		U\$			3. Date Incorporated or Qualified 09/01/1978	3a. Date 0	5/01/	1995
2. Principal Plac	e of Business	2a. Mailing Address			4. FEI Number 59-1840320	<u> </u>		Applied For
21		26			387 1040320			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
22		City & State			6. Election Campaign Financing			00 May Be
City & State		28			Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Countr	у	8. This corporation has liability for in	ntangible tax	under:	s 199.032,
24	25	29	30		Fiorida Statutes X Yes			
	g. Name and Address of Current	Registered Agent		41 No	10. Name and Address of New R	egistered A	gent	
LICONA	NIDET LATADO A		8					
	NDEZ, LAZARO A. /. Martin Luther King, Jr. Bi	OLII EVARD	8	2 Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
SUITE		VOLCTAID	8	3				
	, FL 33607		L				1	7. 0. 1.
	,		8	4 City		FL	85	Zip Code
	, and accept the obligations of, Section							
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SIGNATURE 2 12.	OFFICERS AND	DIRECTORS	13.		when reinstating: ADDITIONS/CHANGES TO OFF	CERS AND		
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4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.29.90

213.275.2778

Daytime Phone #