## 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 # 600033 (5)

1. Corporation Name

NORTH-PARK PEDIATRICS PROFESSIONAL ASSOCIATION ASSOCIATION

NORTHPARK PEDIATRICS PROFESSIONAL ASSOCIATION

FILED
Jan 26 1998 8:00am
Secretary of State



SOUTH TOTAL ST   SAME SHOWN   SERVICE ADDITIONS   SAME SHOWN   SERVICE ADDITIONS   SAME SHOWN						
SURE ADDRESS OF TAXABLE PROPORT FUNCE - GREAT PROPERTY STATES SPACE  2. Principe Place of Business	Principal Place of Business Mailing Address					
NORTH MAMI BEACH FL 33169  PENDROME FINCE FL 69894  2. Principal Place of Business  2. Malign Address		TH ST				
Suite, Apt. 4, oc.  2. Principal Place of Business 2. A Melign Address Suite, Apt. 4, oc.  2. Suite, Apt. 4, oc.		11 DEACH EL 20160				DO NOT WRITE IN THIS SPACE
2. Principal Piace of Business   2a. Malling Address   25. Col. Michael Lude!   59-0937192   Into Application   25. Col. Michael Lude!   59-0937192   Into Application   25. Col. Michael Lude!   59-0937192   Into Application   25. Col. Michael Lude!   55-0937192   Into Application   25. Col. May be 75-0937192   Into A		11 DEACH LE 20103	PEMBRONE PINEOTTE GOOZA			
2. Principal Place of Business   2a. Malling Address   53   CO Milling Address   59   0837192						
Suria, Apt. 4, etc.	2 Principal P	lace of Rusiness	2a Mailing Address			
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.	22. Walling Address			400/1.	1.011	
22   27   5745 S. University   5. Certificate of Status Desired   Fee Required   10   10   10   10   10   10   10   1		# oto	Suite Ant # etc			
City & State  23		#, <del>G</del> (C.	1.			5. Certificate of Status Desired
29   DANIE   FLORING   Trust Fund Contribution   Active to Freeze   Active to Fund   Personal Property Tax clue June 30.   Trust Fund Contribution   Active to Freeze   Active to Fund   Personal Property Tax clue June 30.   Trust Fund Contribution   Active to Freeze   Name and Address of Current Registered Agent   10. Name and Address of Current Registered Agent   10. Name and Address of Current Registered Agent   10. Name and Address of New R						
Zp				EIND	000	
224   25   29 33328   30   Drowwalk Personal Property Tax due June 30.   Yes   No   2. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   255 NO. UNIVERSITY DRIVE   257 NO. UNIVERSITY DRIVE   256 NO. UNIVERSITY DRIVE   257 NO. UNIVERSITY DRIVE   258 Stoet Address (P.O. Box Number is Not Acceptable)   Drive   257 NO. UNIVERSITY DRIVE   257 NO. UNIVERSITY   258 Stoet Address (P.O. Box Number is Not Acceptable)   Drive   259 No. University   257 NO. University   257 NO. University   250 NO. University   257 NO		Country	+ <del></del>			
9, Name and Address of Current Registered Agent  UDELL, MICHAEL B. 287 NOV. UNIVERSITY DRIVE PEMBROKE PINE FL 33024  28 Street Address (P.O. Box Number is Not Acceptable)  77 / 5 S. UDIVERSITY DRIVE PEMBROKE PINE FL 33024  28 Street Address (P.O. Box Number is Not Acceptable)  79 / 71 S. UDIVERSITY DRIVE PEMBROKE PINE FL 33024  29 Street Address (P.O. Box Number is Not Acceptable)  70 / 71 S. UDIVERSITY DRIVE PEMBROKE PINE FL 33024  20 Street Address (P.O. Box Number is Not Acceptable)  71 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chancing its registered dispose, in a small statute, and the special statutes of the corporation's board of directors. I hereby accept the appointment as registered dispose, in a small statute, and the special statutes of the corporation's board of directors. I hereby accept the appointment as registered dispose, in a small statute, and the special statutes of the corporation's board of directors. I hereby accept the appointment as registered dispose, in a small statute, and the special statutes of the corporation's board of directors. I hereby accept the appointment as registered dispose, in a small statute, and the special statutes of the corporation's board of directors. I hereby accept the appointment as registered dispose, and the special statutes of the corporation's board of directors. I hereby accept the appointment as registered dispose, and the special statutes of the purpose of chancing is registered disposed upon and the special statutes as registered disposed upon and the special statutes. I in the statutes are special statutes as registered disposed upon and the special statutes. I in the statutes are special statutes. I in the statutes are special statutes. I in the statutes and address as statutes. I in the purpose of Nami Lakes of Nami Lakes and Nami Lakes and Nami Lakes and Nami Lakes and Nami Lakes. I in the certify that the information supplied with this fili	<del></del> , '	<del></del>	· ·			
UDELL MICHAEL B. 235 NO. UNIVERSITY DRIVE PEMBROKE PINE FL 33024  33  34  35  36  37 1/5 S. University  The FL 33024  36  37 1/5 S. University  The FL 33024  37 1/5 S. University  The FL 33024  38  38  39  40  30  40  30  40  30  40  30  40  40	24			30 %	7. 2000	
25 NO. UNIVERSITY DRIVE PEMBROKE PINE PL 33024  32  33  34  35  36  36  36  37  37  38  38  38  38  38  38  38  38	115		negistered Agent		81 Name	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this elatement for the purpose of changing list 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, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of the corporation's board of directors. I hereby accept the obligations of directors. I hereby accept the obligation of the corporation's board of directors. I hereby accept the obligation and familiar with, and accept the obligation and familiar and familiar and familiar with, and accept the obligation and familiar and familiar and familiar and familiar with, and accept the obligation and familiar and familiar with, and accept the obligation and familiar and familiar with, and accept the obligation and familiar and familiar with, and accept the obligation and familiar and familiar and familia		·				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this elatement for the purpose of changing list 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, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of the corporation's board of directors. I hereby accept the obligations of directors. I hereby accept the obligation of the corporation's board of directors. I hereby accept the obligation and familiar with, and accept the obligation and familiar and familiar and familiar with, and accept the obligation and familiar and familiar and familiar and familiar with, and accept the obligation and familiar and familiar with, and accept the obligation and familiar and familiar with, and accept the obligation and familiar and familiar with, and accept the obligation and familiar and familiar and familia					82 Street	t Address (P.O. Box Number is Not Acceptable)
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, and accept the obligations of, Sections 807.0502 and 607.1508, Florids Statutes, the above-named corporation's board of directors. I hereby accept the purpose of changing lis registered agent, and accept the obligations of, Section 607.0502 florids. Statutes of Flo	PE	MBROKE PINE FL 33024				745 S. University Urive
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 Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board o					83	·
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 Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board o					84 City	lest 7in Codo
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 agreet, a provisions of Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agreet, and the provisions of Section 607.0505, Florida Statutes, section 607.0505, Florida					<b>T</b>	
office or registered agent, or both, in the State of Horida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an familiar with, and accept the obligations of, section 607.555, Florida Statutes.    Signature   Section of Internation   Section of I	11. Pursuant I	to the provisions of Sections 607.0502	and 607.1508, Florida S	tatutes, the a	bove-named	d corporation submits this statement for the purpose of changing its registered
SIGNATURE    Signature, typed or private name of registanced again, and die if applicable. (NOTE Registered Agent agrature required when relocation)   DATE	office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	f Fiorida, Such change v ions of Section 607 0505	vas authorize 5. Florida Stat	d by the corp	rporation's board of directors. I hereby accept the appointment as registered
Separative, typed or printed raise of registered agent and title if applications (POTE Registered Agent agricults depend when robustations)   DATE		m learning was, and decept the congar	0.100.100.1001.000.	2, 1 1011Ga Ota	.0.03.	
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   ITITLE   Change   Addition   Change   Addition   Change   Addition   Addition   Change   Cha		Signature, typed or printed name of registered agent	and title if applicable.	(NOTE, Registere	d Agent signature	re required when reinsteting) DATE
TITLE   P						
STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL TITLE V DELETE Z1TITLE V DELETE Z2 NAME Z2 STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE S MAMM FL Z2 NAME Z3 STREET ADDRESS CITY-ST-ZIP TITLE S DELETE S1 NAME ROTH, MARY K. STREET ADDRESS CITY-ST-ZIP MAMM LAKES FL STREET ADDRESS CITY-ST-ZIP TITLE NAME ACEVEDO, RAY STREET ADDRESS CITY-ST-ZIP N-MIAMIL LAKES FL S1 NAME ACEVEDO, RAY STREET ADDRESS SUNRISE FL DELETE S1 NAME STREET ADDRESS CITY-ST-ZIP N-MIAMIL LAKES FL S1 NAME ACEVEDO, RAY STREET ADDRESS SUNRISE FL DELETE S1 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS SUNRISE FL DELETE S1 NAME STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP Change Addition S2 NAME S3 STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS S5 STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS S5 STREET ADDRESS S5 STREET ADDRESS S6 STREET ADDRESS S6 CITY-ST-ZIP NAME STREET ADDRESS S6 STREET ADDRESS S6 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS S6 CITY-ST-ZIP NAME STREET ADDRESS S7 CITY-ST-ZIP NAME STREET ADDRESS S7 CITY-ST-ZIP NAME STREET ADDRESS S7 CITY-ST-Z		Р	DELETE	1.1 TI	TLE	
STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL TITLE V DELETE Z1TITLE V DELETE Z2 NAME Z2 STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE S MAMM FL Z2 NAME Z3 STREET ADDRESS CITY-ST-ZIP TITLE S DELETE S1 NAME ROTH, MARY K. STREET ADDRESS CITY-ST-ZIP MAMM LAKES FL STREET ADDRESS CITY-ST-ZIP TITLE NAME ACEVEDO, RAY STREET ADDRESS CITY-ST-ZIP N-MIAMIL LAKES FL S1 NAME ACEVEDO, RAY STREET ADDRESS SUNRISE FL DELETE S1 NAME STREET ADDRESS CITY-ST-ZIP N-MIAMIL LAKES FL S1 NAME ACEVEDO, RAY STREET ADDRESS SUNRISE FL DELETE S1 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS SUNRISE FL DELETE S1 NAME STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP Change Addition S2 NAME S3 STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS S5 STREET ADDRESS S4 CITY-ST-ZIP NAME STREET ADDRESS S5 STREET ADDRESS S5 STREET ADDRESS S6 STREET ADDRESS S6 CITY-ST-ZIP NAME STREET ADDRESS S6 STREET ADDRESS S6 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS S6 CITY-ST-ZIP NAME STREET ADDRESS S7 CITY-ST-ZIP NAME STREET ADDRESS S7 CITY-ST-ZIP NAME STREET ADDRESS S7 CITY-ST-Z	NAME	KENDRICK, WILLIAM M.		1.2 N/	AME	
CITY-ST-ZIP  FT. LAUDERDALE FL  114 CITY-ST-ZIP  TITLE  V  DELETE  21 TITLE  22 NAME  3454 SW 77 AVENUE, #56  CITY-ST-ZIP  TITLE  S  MIAMI FL  32 NAME  ROTH, MARY K.  14712 BALGOWEN ROAD  STREET ADDRESS CITY-ST-ZIP  MIAMI LAKES FL  33 STREET ADDRESS STREET ADDRESS SUNRISE FL  DELETE  14 CITY-ST-ZIP  MAME  ACEVEDO, RAY  9440 N.W. 33RD MANOR  STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  NAME  STREET ADDRESS CITY-ST-ZIP  DELETE  15 STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  ADDRESS CITY-ST-ZIP  DELETE  15 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  Addition  NAME  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  Addition  Change  Addition  Addition  Addition  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  Addition  Addition  Addition  Addition  Addition  Addition  NAME  STREET ADDRESS CITY-ST-ZIP  Addition  ADDIT ST ZIP  ADI	_	•		<b>I</b>		
TITLE  TUCKER, STEVEN G.  9454 SW 77 AVENUE, #56  CITY-ST-ZIP  NAME  ROTH, MARY K.  14712 BALGOWEN ROAD  MIAMI LAKES FL  TITLE  ACEVEDO, RAY  9440 N.W. 33RD MANOR  STREET ADDRESS  CITY-ST-ZIP  TITLE  ACEVEDO, RAY  9440 N.W. 33RD MANOR  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  TITLE  ACEVEDO, RAY  9440 N.W. 33RD MANOR  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  STREET						
CITY-ST-ZIP  TITLE  S  DELETE 3.1 TITLE 3.2 NAME ROTH, MARY K. 14712 BALGOWEN ROAD 3.3 STREET ADDRESS CITY-ST-ZIP MAMILAKES FL  DELETE 4.1 TITLE ACEVEDO, RAY 9440 N.W. 33RD MANOR STREET ADDRESS CITY-ST-ZIP DELETE 4.1 STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP Change Addition Addition Addition Addition Addition Addition Addition Addition Addition AMAE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP Change Addition Ad		V	Delete			Change Addition
CITY-ST-ZIP  TITLE  S  DELETE 3.1 TITLE 3.2 NAME ROTH, MARY K. 14712 BALGOWEN ROAD 3.3 STREET ADDRESS CITY-ST-ZIP MAMILAKES FL  DELETE 4.1 TITLE ACEVEDO, RAY 9440 N.W. 33RD MANOR STREET ADDRESS CITY-ST-ZIP DELETE 4.1 STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP Change Addition Addition Addition Addition Addition Addition Addition Addition Addition AMAE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP Change Addition Ad		THOKED STEVEN C				SAM SW 1307X 51 11 CHANGE IN MOUNTED
CITY-ST-ZIP  TITLE  S  DELETE 3.1 TITLE 3.2 NAME ROTH, MARY K. 14712 BALGOWEN ROAD 3.3 STREET ADDRESS CITY-ST-ZIP MAMILAKES FL  DELETE 4.1 TITLE ACEVEDO, RAY 9440 N.W. 33RD MANOR STREET ADDRESS CITY-ST-ZIP DELETE 4.1 STREET ADDRESS CITY-ST-ZIP DELETE 5.1 TITLE DELETE 5.3 STREET ADDRESS CITY-ST-ZIP Change Addition Addition Addition Addition Addition Addition Addition Addition Addition AMAE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP Change Addition Ad	_	•		4.4		maiami kid 33150
TITLE S DELETE 3.1 TITLE S. Addition NAME ROTH, MARY K. 14712 BALGOWEN ROAD 3.3 STREET ADDRESS 14712 BALGOWEN ROAD 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP MIAMI LAKES FL 3.4 CITY-ST-ZIP DELETE 4.1 TITLE ACEVEDO, RAY 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 5.3 STREET ADDRESS 5.3 STREET AD	STREET ADDRESS			2.3 ST	REET ADDRESS	Min 11 100 33/38
ROTH, MARY K.  STREET ADDRESS  CITY-ST-ZIP  MIAMI LAKES FL  TITLE  ACEVEDO, RAY  9440 N.W. 33RD MANOR  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  4.2 NAME  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  SUNRISE FL  DELETE  5.1 TITLE  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  Change  Addition  Additi	· · · ·					
STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL 33. STREET ADDRESS CITY-ST-ZIP TITLE ACEVEDO, RAY 9440 N.W. 33RD MANOR STREET ADDRESS CITY-ST-ZIP TITLE DELETE 41. TITLE 42. NAME 42. NAME 43. STREET ADDRESS CITY-ST-ZIP TITLE DELETE 51. TITLE 51. TITLE 52. NAME 53. STREET ADDRESS CITY-ST-ZIP TITLE DELETE 51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY-ST-ZIP TITLE 53. STREET ADDRESS 54. CITY-ST-ZIP 54. TITLE 55. STREET ADDRESS 56. STREET ADDRESS 57. STREET ADDRESS	TITLE		☐ DELETE	3.1 11	TLE	Change L.! Addition
CITY-ST-ZIP MAMI LAKES FL  3.4.CITY-ST-ZIP N. miami Beach FL 33160  TITLE T DELETE 4.1 TITLE Change Addition  NAME ACEVEDO, RAY 4.2 NAME  STREET ADDRESS SUNRISE FL  4.4 CITY-ST-ZIP  TITLE Change Addition  4.3 STREET ADDRESS  CITY-ST-ZIP  DELETE S.1 TITLE Change Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE CHANGE Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE 6.1 TITLE  Change Addition  Change Addition  Change Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  THUE CHANGE Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  14. 1 hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes.   further certify that the information	NAME			3.2 N	ME	11-11-11
TITLE T DELETE 4.1 TITLE	STREET ADDRESS	14712 BALGOWEN ROAD		3.3 S1	REET ADDRESS	
ACEVEDO, RAY 9440 N.W. 33RD MANOR STREET ADDRESS CITY-ST-ZIP SUNRISE FL 4.2 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP DELETE 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. 1 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	CITY-ST-ZIP	MIAMI LAKES FL		3.4. C	ITY-ST-ZIP	N. Miami Beach, FL 33160
STREET ADDRESS CITY-ST-ZIP SUNRISE FL 4.3 STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  S.1 TITLE S.2 NAME STREET ADDRESS CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP  DELETE 6.1 TITLE S.3 STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  Addition  NAME STREET ADDRESS CITY-ST-ZIP S.4 CITY-ST-ZIP S.5 STREET ADDRESS G.8 STREET ADDRESS CITY-ST-ZIP  14. 1 hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes,   further certify that the information	TITLE	T	DELETE	4.1 TT	DLE .	Change Addition
SUNRISE FL  4.4 CITY-ST-ZIP  NAME  DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP  TITLE 6.1 TITLE 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. 1 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	NAME	ACEVEDO, RAY		4. 2 N	AME	
CITY-ST-ZIP  SUNRISE FL  4.4 CITY-ST-ZIP  TITLE  5.1 TITLE  5.2 NAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  5.4 CITY-ST-ZIP  TITLE  6.1 TITLE  6.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  6.3 STREET ADDRESS  CITY-ST-ZIP  14. 1 hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, I further certify that the information	STREET ADDRESS	9440 N.W. 33RD MANOR		4.3 ST	REET ADDRESS	
TITLE S.1 TITLE S.2 NAME  STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP DELETE 6.1 TITLE S.3 STREET ADDRESS CITY-ST-ZIP Change Addition NAME STREET ADDRESS CITY-ST-ZIP Addition NAME 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 14. 1 hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information	ľ	SUNRISE FL			i	
NAME  STREET ADDRESS  CITY - ST - ZIP  5.4 CITY - ST - ZIP  5.4 CITY - ST - ZIP  TITLE  DELETE  6.1 TITLE  6.2 NAME  6.2 NAME  5.3 STREET ADDRESS  CITY - ST - ZIP  14. 1 hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information			DEFTE			Channe Aridition
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS CITY-ST-ZIP 14. 1 hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information				1	_	- Samilo - Lindulou
CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE 6.2 NAME  STREET ADDRESS CITY-ST-ZIP  14. 1 hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information					_	
TITLE  NAME  6.2 NAME  5.2 NAME  6.3 STREET ADDRESS  CITY-S1-ZIP  14. 1 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						
NAME  STREET ADDRESS  CITY-S1-ZIP  14. 1 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			<b>—</b>			
STREET ADDRESS CITY-S1-ZIP  14. 1 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	TITLE		L_I DELETE	6.1 TI	rle	L Change Addition
CITY-S1-ZIP  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	NAME			6.2 N	UME 3MU	
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	STREET ADDRESS			6.3 ST	REET ADDRESS	
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	CITY-ST-ZIP			6.4 CI	TY-ST-ZIP	
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 ! am an	14. I hereby c	ertify that the information supplied with	this filling does not qual	ify for the exe	emption state	ted In Section 119.07(3)(i), Florida Statutes. I further certify that the information

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: W. SIGNATURE DEDUIPER COLLEGE

Unes

(305) 651-2223