

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 600275 (2)

1. Corporation Name

PHYSICIANS GROUP OF SOUTH FLORIDA, P.A.



Principal Place of Business

Mailing Address

250 WEST 63 ST
MIAMI BEACH FL 33141

250 WEST 63 ST
MIAMI BEACH FL 33141

3. Date Incorporated or Qualified
09/27/1967

3a. Date of Last Report
01/27/1995

2. Principal Place of Business

2a. Mailing Address

21 4701 meridian Ave

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 7450

27

City & State

City & State

23 miami beach, FL

28

Zip

Country

Zip

Country

24 33141

25

USA

29

30

4. FEI Number

59-1173552

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALAN KUTNER, M.D.
250-63 ST.
SUITE 9A
MIAMI BEACH FL 33141

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

[Signature]

(NOTE: Registered Agent signature required when reinstating.)

2/13/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

S
DUQUE, DARIO
250 WEST 63 ST.
MIAMI BEACH FL

TITLE ☐ DELETE

T
JONAS, IVAN M.
250 WEST 63RD ST
MIAMI BEACH FL

TITLE ☐ DELETE

P
KUTNER, ALAN
250 WEST 63RD STREET
MIAMI BEACH FL

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/96 (305) 674-5795
Date Daytime Phone #

CR2E034 (12/95)