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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **600294** **(3)**

1. Corporation Name

PABALAN, GONZALEZ, SCHAFFHAUSEN, & ZURAWIECKI, M .D.'S P.A.

Principal Place of Business

7000 SW 62ND AVENUE #300
SOUTH MIAMI FL 33143

Mailing Address

7000 SW 62ND AVENUE #300
SOUTH MIAMI FL 33143

3. Date Incorporated or Qualified: **11/02/1967**

3a. Date of Last Report: **05/03/1995**

4. FEI Number: **59-1195043** ☐ 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

2. Principal Place of Business

21
22 State, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address

26
27 State, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent

PABALAN, STEVEN S.
7000 SW 62ND AVENUE #300
SOUTH MIAMI FL 33143

10. Name and Address of New Registered Agent

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 607.1503, 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 _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1-1 TITLE	☐ Change ☐ Addition
NAME	SCHAFFHAUSEN, LEE ANN		1-2 NAME	
STREET ADDRESS	7000 SW 62ND AVENUE #300		1-3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH MIAMI FL		1-4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	2-1 TITLE	☐ Change ☐ Addition
NAME	PABALAN, STEVEN		2-2 NAME	
STREET ADDRESS	7000 SW 62ND AVENUE #300		2-3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH MIAMI FL		2-4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	3-1 TITLE	☐ Change ☐ Addition
NAME	GONZALEZ, EDUARDO		3-2 NAME	
STREET ADDRESS	7000 SW 62ND AVENUE #300		3-3 STREET ADDRESS	
CITY-ST-ZIP	SOUTH MIAMI FL		3-4 CITY-ST-ZIP	
TITLE		☐ DELETE	4-1 TITLE	☐ Change ☐ Addition
NAME			4-2 NAME	
STREET ADDRESS			4-3 STREET ADDRESS	
CITY-ST-ZIP			4-4 CITY-ST-ZIP	
TITLE		☐ DELETE	5-1 TITLE	☐ Change ☐ Addition
NAME			5-2 NAME	
STREET ADDRESS			5-3 STREET ADDRESS	
CITY-ST-ZIP			5-4 CITY-ST-ZIP	
TITLE		☐ DELETE	6-1 TITLE	☐ Change ☐ Addition
NAME			6-2 NAME	
STREET ADDRESS			6-3 STREET ADDRESS	
CITY-ST-ZIP			6-4 CITY-ST-ZIP	

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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)(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 added, or an attached addendum, with an address.

SIGNATURE: _____ 3/20/96 (305)-665-6926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number