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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Mar 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 600640

(7)

DAVID A. GIORDANO M. D., P.A.

Principal Place of Business 1950 ARLINGTON STREET #807 SARASOTA FL 34239		Mailing Address 1950 ARUNGTON STRE SARASOTA FL 34239-30	Mailing Address 1950 ARUNGTON STREET #399- #-1/9 SARASOTA FL 34239-3525			
					3. Date Incorporated or Qualified 12/09/1968	3a. Date of Last Report 03/01/1996
2. Principal	LPlace of Business	28. Mailing Address 26			4. FEI Number 59-1226187	Applied For Not Applicable
Suite, Ap	ot #, €t¢.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & St	tate	Cily & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ 24	Country 25	Z(p	Country 30		8. This corporation has liability for i	
= 11	9. Name and Address of Co				10. Name and Address of New Re	
CH	ORDANO,DAVID A		81 N	lame		
	50 ARLINGTON ST #867 //	0	ļ			
	ARASOTA FL 34239	7	82 . S	treet Addre	ess (P.O. Box Number is Not Acceptab	ole)
			83	***************************************	V	
			84 C	ity		FL 85 Zip Code
office o	rit to the provisions of Sections 605 ir registered agent or both, in the Lam familiar with, and accept the i	State of Florida. Such change wa	as authorized by th	amed corpo e corporatio	oration submits this statement for the pon's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
SIGNATURE						
SIGNATURI	Signature: type doi: printed name of register		NOTE: Registered Agent si	ignature required		DATE
SIGNATURI	Signature: typest or printed name of register OFFICERS	S AND DIRECTORS	NOTE: Registered Agent si	gnature required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
SIGNATURE 12. THE	Signature: typest or printed name of register OF FICE RS		NOTE: Registered Agent si 13. 1.1 TITLE	gnature required		
SIGNATURE 12. THE NAME	Signature: typed or protect name of register Of FICERS PD GIORDANO, DAVID A	S AND DIRECTORS	NOTE: Registered Agent is 13. 1.1 TITLE 1.2 NAME			CERS AND DIRECTORS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS	OFFICERS PD GIORDANO, DAVID A 1950 ARLINGTON ST.	S AND DIRECTORS	NOTE Registered Agent is 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD	DAESS		CERS AND DIRECTORS IN 12
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64 City-St-ZiP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, 1 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 recover or busine empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name