

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 # 602317

(0)

1. Corporation Name

JOSEPH T. OSTROSKI, M.D., P.A.

Principal Place of Business

8755 SW 94TH ST
SUITE 200
MIAMI FL 33176
US

Mailing Address

8755 SW 94TH ST
SUITE 200
MIAMI FL 33176
US



3. Date Incorporated or Qualified

08/04/1970

3a. Date of Last Report

04/17/1995

4. FEI Number

59-1303962

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

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

OSTROSKI, JOSEPH T
8755 SW 94TH ST
SUITE 200
MIAMI FL 33176

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

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 607.07(2) and 607.15(4), 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 607.07(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Officer or Director)

(Signature of Registered Agent or Officer or Director)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

OSTROSKI, JOSEPH T
8755 N KENDALL DR
MIAMI FL

☐ DELETE

TITLE

TD

NAME

OSTROSKI, JOSEPHINE
8755 N KENDALL DR
MIAMI FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY, ST, ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY, ST, ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY, ST, ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

35 TITLE

36 NAME

37 STREET ADDRESS

38 CITY, ST, ZIP

39 TITLE

40 NAME

41 STREET ADDRESS

42 CITY, ST, ZIP

8755 S.W. 94TH ST Suite 200
MIAMI, FL 33176

8755 S.W. 94TH ST Suite 200
MIAMI, FL 33176

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph T Ostroski

1-16-96

305-270 0123

CR2E034 (12/95)