FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** May 11 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 602981 MELVYN SARNOW D.O., PROFESSIONAL ASSOCIATION Mailing Address Principal Place of Business 11120 N KENDALL DR 11120 N KENDALL DR SUIE 100 SUIE 100 DO NOT WRITE IN THIS SPACE MIAMI FL 33176 MIAMI FL 33176 3. Date Incorporated or Qualified 07/23/1971 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1371790 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Zip Country Zφ 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SARNOW, MELVYN 11120 N KENDALL DR 82 Street Address (P.O. Box Number is Not Acceptable) **SUIE 100** 83 **MIAMI FL 33176** 84 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE **SARNOW.MELVYN** 1.2 NAME NAME 11120 N KENDALL DR SUITE 100 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33176** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE RACHLIN, ROBERT NAME 2.2 NAME 11120 N KENDALL DR #201 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2. 4 CITY-S1-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY- ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with his filing locs nor 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 visual 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 ecologic occurrence to the corporation or the ecologic occurrence to the corporation of the ecologic occurrence to the corporation of the ecologic occurrence to the ecologic occ

6.4 CITY-ST ZIF

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

CICNIATURE

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

4/29/98

(315) 279-0808

Change

Addition