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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

| 7  | 1996 🤏   | S 11 15                | DIVISION C  | of Corpora   | TIONS  |  |                                       |  |  |
|--|--|------------------------|---|--|--|--|---------------------------------------|--|--|
| 1. Corporation   | MENT # 604<br>CLINIC, INC.   | 195                    | (8)   |  |  |  |                                       |  |  |
| 55   |  |                        |   |  |  |  |                                       |  |  |
| Principa; Place  | of Business  |                        | Mailing Address                                       |  |  |  |                                       |  | IA BUBUI BABUI 188   |
| 609 VIRGINIA   |  |                        | 609 VIRGINIA DR.                                      |  |  |  |                                       |  |  |
| ORLANDO F  | FL 32803-8844  |                        | ORLANDO FL 32803                                      | 3-8844   |  |  |                                       |  |  |
|  |  |                        |   |  |  | 3. Date Incorporated or Qualified 03/06/1973                                       |                                       | of Last Re<br>01/18/19                                 |  |
| 2. Principal Pla   | ace of Business  |                        | a. Mailing Address                                    |  |  | 4. FEI Number<br>EO-1450054  |                                       |  | Applied For  |
| Suite, Apt. #  | etc.   | 26                     | Suite, Apt. #, etc.                                   |  |  | 59-1458054   |                                       |  | Not Applicable  Additional   |
|  | 1 010  | 27                     |   |  |  | 5. Certificate of Status Desired   |                                       |  | Required   |
| City & State   |  |                        | City & State  |  |  | 6. Election Campaign Financing   |                                       |  | <b>D</b> мау Ве  |
| 7.0  | Canala   | 28                     | 7:  |  |  | Trust Fund Contribution  |                                       |  | to Fees  |
| <i>Ζ</i> φ<br>]  | Country<br>25  | 29                     | Zip<br>   | Gouni<br>30  | itry   | 8. This corporation has liability for Florida Statutes                             | or intangible ta<br>es ∷No            | ix under s   | 199.032,   |
|  | g. Name and Address of C   |                        | stered Agent  |  |  | 10. Name and Address of New  | _                                     | Agent  |  |
|  |  |                        |   | E  | B1 Name  |  |                                       |  |  |
|  | , EMIL F.M., D.O.  |                        |   | 8  | 82 Street Add  | ress (P.O. Box Number is Not Accepta   | able)                                 |  | · · · · · · · · · · · · · · · · · · ·  |
|  | EMORAN BLVD.   |                        |   | -:   |  |  |                                       |  |  |
|  | LBERRY FL 32707  |                        |   | •  | B3   |  |                                       |  |  |
| CASSEL   | LDLIGHT IL OZIOI   |                        |   |  | 1  |  |                                       |  |  |
| Pursuant to or registere familiar with GNATURE   | o the provisions of Sections 607<br>ad agent, or both, in the State c<br>h, and accept the obligations of  |                        |   | ites, the above<br>ized by the co<br>es.   |  | ration submits this statement for the p<br>ird of directors. Thereby accept the ap | FL<br>ourpose of cha<br>opointment as | .     `  | Gode<br>egistered offi<br>agent. Lam   |
| Pursuant to<br>or registere<br>familiar with<br>IGNATUREs  s   | o the provisions of Sections 607<br>ad agent, or both, in the State o<br>h, and accept the obligations of<br>Synature, typed or proled name of registers<br>OFFICER  |                        | fapplicable (f  | ites, the above<br>ized by the co<br>es.   |  |  | ourpose of cha<br>appointment as      | anging its ri<br>registered                            | egistered offic<br>agent. I am   |
| Pursuant to or registere familiar with IGNATURE     S      ILE   | o the provisions of Sections 607 ad agent, or both, in the State of the and accept the obligations of Shinature, typed or printed name of registers  OFFICEF   | ed agent and little if | fapplicable (f  | utes, the above ized by the coes.  Off: Registered A. 1 1 HILL   | e-named corpor<br>provation's hoa  | od when remobilings  | DATE FICERS AND                       | anging its ri<br>registered                            | egistered offic<br>agent. I am   |
| 1. Pursuant to or registere familiar with HGNATURE S 2.  ILE  AME  | o the provisions of Sections 607 ad agent, or both, in the State of th | ed agent and life it   | fapplicable (f  | utes, the above ized by the coas.  ACT: Registered A.  1 1 TITL  12 NAM  | e-named corpor<br>progration's hoa<br>gent squature responses<br>LE  | od when remobilings  | DATE FICERS AND                       | anging its ri<br>registered                            | egistered offi<br>agent, I am<br>RS IN 12  |
| Pursuant to or registere familiar with iGNATURE s      LE      LE      AME      IRRET ADDRESS  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Signature, typed or printed name of registers PD FELSKI, EMIL F.M., D.C. 1120 SEMORAN BLVD.   | ed agent and life it   | fapplicable (f  | utes, the above ized by the coas.  13. 1 1 TITL 12 NAM 13 STRE   | e-named corpor<br>progration's boar<br>gont squature require<br>LE<br>ME<br>EET ADDRESS  | od when remobilings  | DATE FICERS AND                       | anging its ri<br>registered                            | egistered offi<br>agent, I am<br>RS IN 12  |
| 1. Pursuant to or registere familiar with strong the familiar with strong to the familiar with strong the familiar with strong the familiar to the familiar t  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Skirature, typed or pretted name of register OFFICEF  PD  FELSKI, EMIL F.M., D.C 1120 SEMORAN BLVD. CASSELBERRY FL  | ed agent and life it   | fapplicable (f  | utes, the above ized by the coas.  13. 1 1 TITL 12 NAM 13 STRE   | e-named corpor provation's hoa  gont squature require  LE  ME  EET AGDRESS (-S1-ZP)  | od when remobilings  | DATE  FICERS AND                      | anging its ri<br>registered                            | egistered offic<br>agent, I am<br>RS IN 12   |
| 1. Pursuant to or registere familiar with iGNATURE S 2. ILE AMME REET ADDRESS TY-ST-ZIP  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Signature, typed or printed name of registers PD FELSKI, EMIL F.M., D.C. 1120 SEMORAN BLVD.   | ed agent and life it   | applicable (NCTORS                                    | utes, the above ized by the coas.  13. 1 1 TITL 12 NAM 13 STRE   | e-named corporation's hoat gant's greature requestion for the properties of the prop | od when remobilings  | DATE  FICERS AND                      | anging its ri<br>registered  DIRECTO Change            | egistered officegent. I am RS IN 12 Addition   |
| 1. Pursuant to or registere familiar with IGNATURE S 2. ILE MAME IRREET ADDRESS TY-ST-ZIP ILE MME  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicable (NCTORS                                    | utes, the above ized by the colors.  13. 1 1 Titl. 1 2 NAM 1 3 STRI 1 4 City 2 1 Titl. 2 2 NAM   | e-named corporation's hoat gant's greature requestion for the properties of the prop | od when remobilings  | DATE  FICERS AND                      | anging its ri<br>registered  DIRECTO Change            | egistered offi<br>agent. I am<br>RS IN 12  |
| 1. Pursuant to or registere familiar with IGNATURE S 2. ILLE HAME REET ADDRESS TY-ST-ZIP LLE HAME REET ADDRESS TY-ST-ZIP   | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature, typed or proted name of register OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN O.  | ed agent and life it   | fapplicable (f  | utes, the above ized by the costs.  13. 11 TITL 12 NAM 13 STRI 2 NAM 23 STRI 2 4 CITY  | e-named corporation's broad agent's greature real modern of the properties of the pr | od when remobilings  | DAR<br>DAR<br>FICERS AND              | anging its rivergistered  DIFIECTO Change Change       | egistered office agent. I am  RS IN 12 Addition  |
| 1. Pursuant to or registere familiar with iGNATURE s 2. ILLE MME REET ADDRESS IY-ST-ZIP ILLE MME REET ADDRESS IY-ST-ZIP ILLE ME REET ADDRESS IY-ST-ZIP ILLE ME REET ADDRESS IY-ST-ZIP ILLE IN ME REET ADDRESS IY-ST-ZIP  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicable (NCTORS                                    | utes, the above ized by the coase.  13. 1 1 Tiff. 12 NAM 1 3 STRI 2 1 TINL 2 NAM 2 3 STRI 2 4 CITY 3 1 TIFF.   | e-named corporation's from   | od when remobilings  | DAR<br>DAR<br>FICERS AND              | anging its ri<br>registered  DIRECTO Change            | egistered offi<br>agent. I am<br>RS IN 12  |
| 1. Pursuant to or registere familiar with iGNATURE s 2. ILLE MME REET ADDRESS ITY-ST-ZIP ILLE MME REET ADDRESS ITY-ST-ZIP ILLE MME REET ADDRESS ITY-ST-ZIP ILLE MME ME ME MME MME MME MME MME MME MM   | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | fapplicable (f  | utes, the above ized by the coast.  13. 1 Title 12 NAM 13 STRE 2 TINE 22 NAM 23 STRE 24 CITY 3 TITLE 32 NAM  | e-named corporation's from   | od when remobilings  | DAR<br>DAR<br>FICERS AND              | anging its rivergistered  DIFIECTO Change Change       | egistered offi<br>agent. I am<br>RS IN 12<br>Addition  |
| 1. Pursuant to or registere familiar with IGNATURE s 2. ILLE AME REET ADDRESS ITY-ST-ZIP ILLE MEET ADDRESS ITT ITY-ST-ZIP ILLE MEE | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | fapplicable (f  | utes, the above ized by the colors.  13. 1 Title 12 NAM 13 STRI 2 NAM 23 STRI 24 CITY 3 TITLE 32 NAM 33 STRI   | e-named corporation's from   | od when remobilings  | DAR<br>DAR<br>FICERS AND              | anging its rivergistered  DIFIECTO Change Change       | egistered office agent. I am  RS IN 12 Addition  |
| 1. Pursuant to or registere familiar with iGNATURE s 2. ILE AME IREET ADDRESS IY-ST-ZIP ILE MME IREET ADDRESS IY-ST-ZIP ILE MME IY-ST-ZIP ILE MME IREET ADDRESS IY-ST-ZIP ILE MME IREET ADDRESS IY-ST-ZIP ILE MME IREET ADDRESS IY-ST-ZIP  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | fapplicable (f  | utes, the above ized by the colors.  13. 1 Title 12 NAM 13 STRI 2 NAM 23 STRI 24 CITY 3 TITLE 32 NAM 33 STRI   | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its rivergistered  DIFIECTO Change Change       | egistered offin<br>agent. I am<br>RS IN 12<br>Addition                                       |
| 1. Pursuant to or registere familiar with iGNATURE s 2. ILLE AME IRREET ADDRESS ITY-ST-ZIP ILLE MME IRREET ADDRESS  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicative (* CTORS  DELETE                          | utes, the above ized by the colors.  13. 1 Title 12 NAM 13 STRE 2 TINE 2 NAM 23 STRE 24 CITY 3 TITLE 32 NAM 33 STRE 34 CITY  | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its registered  DIRECTO Change Change           | egistered office agent. I am  RS IN 12 Addition Addition                                     |
| 1. Pursuant to or registere familiar with GNATURE  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicative (* CTORS  DELETE                          | utes, the above ized by the colors.  13. 1 Title 12 NAM 13 STRE 14 City 2 1 Title 22 NAM 23 STRI 3 TITLE 32 NAM 33 STRI 34 CHY 4.1 TITLE 42 NAM 43 STRI 43 STRI 44 STRI 44 STRI 45 STRI 45 STRI 45 STRI 45 STRI 47 STRI 48 STR | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its registered  DIRECTO Change Change           | egistered officegent. I am  RS IN 12 Addition Addition                                       |
| 1. Pursuant to or registere familiar with IGNATURE s 2. LLE MME REET ADDRESS ITY-ST-ZIP  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicative (*CTORS  DELETE  DELETE                   | ties, the above ized by the coass.  13. 1 Title 12 NAM 13 STRE 22 NAM 23 STRE 24 CITY 3 1 TITLE 32 NAM 33 STRE 34 CHY 4.1 TITLE 42 NAM 43 STRE 44 CITY   | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its rivergistered  DIRECTO Change Change Change | egistered office agent. I am  RS IN 12 Addition Addition Addition                            |
| 1. Pursuant to or registere familiar with iGNAT URE s 2. ILLE AME REET ADDRESS TY-ST-ZIP ILLE MME REET ADDRESS   | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicative (* CTORS  DELETE                          | utes, the above ized by the colors.  13. 1 Title 12 NAM 13 STRE 14 City 2 1 Title 22 NAM 23 STRI 3 TITLE 32 NAM 33 STRI 34 CHY 4.1 TITLE 42 NAM 43 STRI 43 STRI 44 STRI 44 STRI 45 STRI 45 STRI 45 STRI 45 STRI 47 STRI 48 STR | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its registered  DIRECTO Change Change           | egistered office agent. I am  RS IN 12 Addition Addition                                     |
| 1. Pursuant to or registere familiar with iGNATURE S  2. ILE AMME REET ADDRESS TY-ST-ZIP ILE AME   | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicative (*CTORS  DELETE  DELETE                   | Ites, the above ized by the colors.  OTE Possered A.  13.  1 TITL  12 NAM  13 STRE  14 CITY  2 TITL  22 NAM  23 STRE  24 CITY  3 TITL  32 NAM  33 STRE  34 CHY  4. TITL  42 NAM  43 STRE  44 CITY  5 TITL  52 NAM  | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its rivergistered  DIRECTO Change Change Change | egistered office agent. I am  RS IN 12 Addition Addition Addition                            |
| 1. Pursuant to or registere familiar with the control of the contr | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | Applicative (*) CTORS  DELETE  DELETE  DELETE  DELETE | JIES, the above ized by the colors.  13.  1 TITL 12 NAM 13 STRE 14 CITY 2 TITL 22 NAM 23 STRE 24 CITY 3 TITL 32 NAM 33 STRE 44 CITY 4 TITL 42 NAM 43 STRE 44 CITY 5 TITL 52 NAM 53 STRE  | e-named corporation's hoad gentisgrature regimes greature greatur | od when remobilings  | DATE FICERS AND                       | anging its rivergistered  DIRECTO Change Change Change | egistered office agent. I am  RS IN 12 Addition Addition Addition                            |
| 1. Pursuant to or registere familiar with siGNATURE  2. III.E AME TREET ADDRESS IIIY-ST-ZIP TILE AME TREET ADDRESS IIY-ST-ZIP  | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | applicative (*CTORS  DELETE  DELETE                   | JIES, the above ized by the colors.  13.  1 TITL 12 NAM 13 STRE 14 CITY 2 TITL 22 NAM 23 STRE 24 CITY 3 TITL 32 NAM 33 STRE 44 CITY 4 TITL 42 NAM 43 STRE 44 CITY 5 TITL 52 NAM 53 STRE  | e-named corporation's from   | od when remobilings  | DATE FICERS AND                       | anging its rivergistered  DIRECTO Change Change Change | egistered office agent. I am  RS IN 12 Addition Addition Addition Addition                   |
| 1. Pursuant to or registere familiar with SIGNATURE SIGN | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | Applicative (*) CTORS  DELETE  DELETE  DELETE  DELETE | JIES, The above ized by the colors.  13.  1 TITL 12 NAM 13 STRE 14 CITY 2 TITL 22 NAM 23 STRE 24 CITY 3 TITL 32 NAM 43 STRE 44 CITY 5 TITL 52 NAM 53 STRE 54 CITY 6 TITL 62 NAM  | e-named corporation's hoad grants greature realized at the second | od when remobilings  | DATE FICERS AND                       | anging its registered  DIRECTO Change Change Change    | egistered office agent. Fam. PRS IN 12 Addition Addition Addition Addition Addition Addition |
| 1. Pursuant to or registere familiar with siGNATURE s 2. ITLE AME TREET ADDRESS ITY-ST-ZIP TLE   | o the provisions of Sections 607 ad agent, or both, in the State of h, and accept the obligations of Syrature typed or proted name of registers OFFICEF  PD  FELSKI, EMIL F.M., D.C  1120 SEMORAN BLVD.  CASSELBERRY FL  STD  MCINTOSH, JOAN 0. 2806 YUCCA ST.   | ed agent and life it   | Applicative (*) CTORS  DELETE  DELETE  DELETE  DELETE | Jies, the above ized by the colored  | e-named corporation's hoad corporation in the second corpora | od when remobilings  | DATE FICERS AND                       | anging its registered  DIRECTO Change Change Change    | egstered office agent. I am  RS IN 12 Addition Addition Addition Addition                    |

SIGNATURE: Signature and typed on printed Name of Signing Officer or Director 17. M. Felski, D.O. 3/16/96 (407)898-2046