## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

## PROFIT CORPORATION ANNUAL REPORT 1998



## FLORIDA DEPARTMENT OF STATE

**FILED** 

Oct 15 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # 604269 D IAN GOLDBERG, M.D., P.	` '		) (00110 15111 DAI)) O(DIA 11318 O(110 1011 AIBI)	<b>#10</b> ]  <b> </b>
Principal Place of Business 200 BUTLER STREET WEST PALM BEACH FL 33407		Mailing Address 200 Butler Street West Palm Beach FL 33407		DO NOT WRITE IN THIS SPACE	
2 Principal P	Place of Business	2a. Mailing Address		3. Date Incorporated or Qualified 04/01/1973 4. FEI Number	Applied For
<u></u>		26		59-1455161	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
<del> </del>		[27]		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	Added to Fees
24	25	29	30		Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	Agent
GOLDBERG, RICHARD I			81 Name		"
200 BUTLER STREET			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	<del></del>
W PALM BEACH FL 33407					
			83		
			84 City		85 Zip Code
	022.0500	10074600 51.11.01.41		FI	
office or agent. I	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a ations of, section 607.0505, Flo	authorized by the corporat orida Statutes.	pration submits this statement for the purpose of clion's board of directors. I hereby accept the appoint	Intment as registered
SIGNATURE	Signature, typed or printed name of registered agen	it and title if applicable (NC	OTE: Registered Agent signature req	quired when reinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD POLITICAL PROPERTY OF THE POLITICAL PROPE	DELETE	1.1 TITLE		Change Addition
NAME	GOLDBERG, RICHARD I		1.2 NAME		
STREET ADDRESS	358 SEABREEZE AVE PALM BEACH, FL 00000		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PALM BEACH, FL 00000		1.4 CITY-ST-ZIP 2.1 TITLE	······································	
NAME		L_  DELETE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
THILE		DELETE	3.1 TITLE		Change Addition
NAME		الما محدد الم	3.2 NAME		viange notice
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-Z/P		
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 I			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		

14. I hereby certify that the information supplied with this filing 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 emphemental 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 on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE.V KAMEN AND POLICE

STREET ADDRESS

CITY-ST-ZIP