

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 604689 (0)
1. Corporation Name
STUART P. BERNSTEIN M.D., P.A.

Principal Place of Business
80 BONNIE LOCH COURT
ORLANDO FL 32806

Mailing Address
80 BONNIE LOCH COURT
ORLANDO FL 32806



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2520 HOMEWOOD DR Suite, Apt. #, etc. 22 City & State 23 ORLANDO FL Zip 24 32809		2a. Mailing Address 25 2520 HOMEWOOD DR Suite, Apt. #, etc. 27 City & State 28 ORLANDO FL. Zip 29 32809		3. Date Incorporated or Qualified 09/25/1973	
Country 25 ORANGE		Country 30 ORANGE		4. FEI Number 59-1482399	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BERNSTEIN (STUART P.) M.D. 80 BONNIE LOCH CT. ORLANDO FL 32806		10. Name and Address of New Registered Agent 81 Name STUART P BERNSTEIN MD 82 Street Address (P.O. Box Number is Not Acceptable) 2520 HOMEWOOD DRIVE 83 84 City Orlando FL 85 Zip Code 32809	
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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 Stuart P Bernstein MD STUART P BERNSTEIN MD 4/1/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BERNSTEIN,STUART P., M.D 2520 HOMEWOOD DRIVE ORLANDO FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BERNSTEIN,RUTH F. 2520 HOMEWOOD DRIVE ORLANDO FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRESSER,DR. MELVIN 22 WEST LAKE BEAUTY DR. ORLANDO FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 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

SIGNATURE: Stuart P Bernstein MD STUART P BERNSTEIN MD 4/1/98 407
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

CR2E034 (10/97)