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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 605102

(3)

OVIDIO E. VITAS, M.D., P.A.

Principal Place of Business	Mailing Address	
1257 FLORIDA AVE. ROCKLEDGE FL 32955	1257 FLORIDA AVE. ROCKLEDGE FL 32955	

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3 Data Incorporated or Ouglified

City & State Country Zip Country Zip Country Signature, typed or ponted name of registered agent and little If applicable. Signature, typed or ponted name of registered agent and little If applicable. NOTER egistered Agent signature required when reinstating) 5. Certificate of Status Desired Fee 6. Election Campaign Financing Trust Fund Contribution Add Add Add Trust Fund Contribution Add Add Add Trust Fund Contribution Add To Name and Address of New Registered Agent Trust Fund Contribution Add To Name and Address of New Registered Agent To Name and Address of New Regi	□ No
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	FORS IN 12
TITLE PD L] DELETE ■ 1.1 TITLE L. Chan	ige 🔲 Addition
NAME VITAS, (OVIDIO E.) 1.2 NAME	
STREET ADDRESS 830 CARAMBOLA DRIVE 1.3 STREET ADDRESS	
CITY-ST-ZIP MERRITT ISLAND FL 1.4 CITY-ST-ZIP	
TITLE SD DELETE 2.1 TITLE Chan	ige Addition
NAME VITAS, OVIDIO E. 2.2 NAME	_
STREET ADDRESS 1257 FLORIDA AVE. 2.3 STREET ADDRESS	
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NAME 6.2 NAME	
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CITY-ST-ZIP 5.4 CITY-ST-ZIP	
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 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.	

In hereby certify that the information supplied with this filling does not quality for the exemploin stated in Section 13-2-001 (1997), Florida Statutes. In the control that indicated on this annual report or supplier intal 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.

1-12-98