

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 638287

(3)

1. Corporation Name

PHINEAS J. HYAMS, M.D., P.A.



Principal Place of Business

1321 NW 14 ST. #602
MIAMI FL 33125

Mailing Address

1321 NW 14 ST. #602
MIAMI FL 33125

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Country

29. Country

9. Name and Address of Current Registered Agent

HYAMS, PHINEAS J
1321 NW 14 ST. #602
MIAMI FL 33125

3. Date Incorporated or Qualified

10/02/1979

3a. Date of Last Report

01/26/1995

4. FEI Number

59-1943249

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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

Phineas J. Hyams

Phineas J. Hyams

1/15/96

12. OFFICERS AND DIRECTORS

1. TITLE

PD
HYAMS, PHINEAS J.
1321 NW 14TH ST
MIAMI FL

☐ DELETE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. NAME

6. STREET ADDRESS

7. CITY - ST - ZIP

8. NAME

9. STREET ADDRESS

10. CITY - ST - ZIP

11. NAME

12. STREET ADDRESS

13. CITY - ST - ZIP

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. NAME

18. STREET ADDRESS

19. CITY - ST - ZIP

20. NAME

21. STREET ADDRESS

22. CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Phineas J. Hyams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/96

305-545-0263

1/15/96

CR2E034 (12/95)