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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

638503

(3)

DOCUMENT #

1. Corporation Name

B.S. BEDI, M.D., P.A.

ŀ	۱	ľ	I	I	l	۱		i	l	I	I	I		Ì	ŀ		I		ı	I	1	ľ	۱	i	ı	ł		١	ı	I	ľ	۱	Î	ľ	ı	l	l	ı	I	l	ı	Ì	1	ı	I	ı	H	I	I	١	I	l		I	
l	I	l	ı	I	ı	I	ł	i	ı	l	I	I			ŀ	ı	H	ŀ		I	ı		i	ł	ı	l		l	ı	I	ľ	l	ı	I		l	ı	I	ı	ľ	ŀ		I	l	I	l	l	I	I	ı	l	ļ	ı	ı	
ı	II	ı	ľ	II	ľ	ı	IJ	1	ı	H	II	ı	1	l	U	ı	П	ı	H	IJ	ı	l	Į	1	ı	1	I	ı	ı	H	II	ı	ı	II	I	U	ı	I	u	I	ı	Ш	I	I	II	ſ	Ħ	1	IJ	ı	II	ľ	l	II	

ZEPHYRH#LL US	NG RD. LS FL 33540	6151 FT. KING ROA ZEPHYRHILLS FL 33 US			3. Date Incorporated or Qualified	3s. Date of La 01/2	7/1995
i '	ice of Business	2a. Mailing Address			4. FEI Number 59-1943168		Applied For
   Suite, Apt. #	f etc	Suite, Apt. #, etc.				i R\$	Not Applicable  75 Additional
	, die	27			5. Certificate of Status Desired	1 1 7 -	Fee Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		5.00 May Be added to Fees
Zipi I	Country	Zip	Count	ry	8. This corporation has liability for in Florida Statutes Yes		lers 199.032,
l <u></u> .	25   9. Name and Address of Curre	29 ent Registered Agent	[30]	······································	10. Name and Address of New R		
			8	1 Name	,,,		·
HINES,	JAMES P.			2 Street Add	ress (P.O. Box Number is Not Acceptable	lo)	
	/DE PARK AVENUE		0	Street Add	ress (F.O. Box Northber is Not Acceptable	ie)	
TAMPA	FL 33606		8	3			
			8	4 City		<b></b> 85	Zip Code
				_L	ration submits this statement for the pur	FL "	<u> </u>
<u>.</u>	Signature, typed or printed herrie of repistered ago OFFICERS A	ND DIRECTORS	13.	gent signature require	id when reinstating! ADDITIONS/CHANGES TO OFFI	DATE ICERS AND DIRE	CTORS IN 12
LF	ΓU						
	BEDL B.S., M.D.	DEFELE	1. 1 7(1)			Cha	inge Addition
MF	BEDI, B.S., M.D. 6151 FT. KING RD.	[] DETERE	1.2 NAM	F		☐ Cha	inge 🔲 Addition
ME EET ADURESS		[] Detest	1.2 NAM 1.3 STR	ET ADDRESS		Cha	inge 🔲 Addition
ME REET ADURESS Y - ST - ZIP	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STR	EFT ADDRESS -SI-ZIP		☐ Cha	
ME REET ADURESS Y - ST - ZIF JE	6151 FT. KING RD.		1.2 NAM 1.3 STR8 1.4 CITY	ET ADDRESS -SI-ZIP			
ME det aduress y - St - Zip Je	6151 FT. KING RD.		1.2 NAM 1.3 STRE 1.4 CITY 2 1 TITL 2 2 NAM	ET ADDRESS -SI-ZIP			
ME REFEADURESS YEST-ZIP LE ME REFEADURESS YEST-ZIP	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRE 1.4 CITY 2 1 TITL 2 2 NAM 2 3 STRE 2 4 CITY	EET ADDRESS -SI-ZIP E EET ADDRESS -SI-ZIP -SET ADDRESS -ST-ZIP		Cha	inge Addition
ME HELLADURESS YEST-ZIP LE ME HELLADURESS YEST-ZIP LE	6151 FT. KING RD.		1.2 NAM 1.3 STR 1.4 CITY 2 1 TITL 2 2 NAM 2 3 STRI 2 4 CITY 3. 1 TITL	EF ADDRESS -SI-ZIP E EEF ADDRESS -ST-ZIP EF ADDRESS -ST-ZIP E			inge Addition
ME RELEADURESS y-ST-ZIP G ME RELEADURESS y-ST-ZIP LE ME	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM	EF ADDRESS -SI-ZIP EF EF ADDRESS -ST-ZIP EF EF ADDRESS -ST-ZIP EF E		Cha	inge Addition
ME RELIADURESS  y-ST-ZIP  ME RELIADURESS  y-ST-ZIP  LE  ME RELIADURESS  HE TADURESS	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI	EF ADDRESS -SI-ZIP E EEF ADDRESS -ST-ZIP EF ADDRESS -ST-ZIP E		Cha	inge Addition
ME RELIADURESS Y-ST-ZIP  ME RELIADURESS Y-ST-ZIP  LE ME RELIADURESS Y-ST-ZIP  LE RELIADURESS Y-ST-ZIP	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI	E E E E E E E E E E E E E E E E E E E		Cha	inge Addition
ME RELIADURESS Y-ST-ZIP  ME RELIADURESS Y-ST-ZIP  LE ME RELIADURESS Y-ST-ZIP  LE RELIADURESS Y-ST-ZIP	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY	EF ADDRESS -SI-ZIP EF ADDRESS		☐ Cha	inge Addition
ME STEEL ADDRESS Y-ST-ZIP ME	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 GITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.3 STR	EF ADDRESS -SI-ZIP EF EF ADDRESS -ST-ZIP EF EF ADDRESS -ST-ZIP EF EF ADDRESS -ST-ZIP EF EF ADDRESS		☐ Cha	inge Addition
ME ALL ADDRESS Y-ST-ZIP ME ALL ADDRESS Y-ST-ZIP E ME ALL ADDRESS Y-ST-ZIP E ME ME ALL ADDRESS Y-ST-ZIP E ME M	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 GITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 GITY	E E E E E E E E E E E E E E E E E E E		Cha	inge Addition
ME RELLADORESS Y-ST-ZIP  ME RELLADORESS Y-ST-ZIP  LE  ME RELLADORESS (Y-ST-ZIP  LE  ME REFLADORESS (Y-ST-ZIP  LE  ME REFLADORESS	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 GITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 GITY 5.1 TITL 5.1 TIT	EF ADDRESS -SI-ZIP EF EF ADDRESS -ST-ZIP EF EF ADDRESS		☐ Cha	inge Addition
ME RELEADORESS (Y-ST-ZIP LE ME RELEADORESS Y-ST-ZIP LE ME RELEADORESS (Y-ST-ZIP LE ME RELEADORESS LY-ST-ZIP LE ME	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM	E EFT ADDRESS -SI-ZIP E E E E E E E E E E E E E E E E E E E		Cha	inge Addition
ME RELLADURESS Y-ST-ZIP LE ME RELLADURESS Y-ST-ZIP LE ME RELLADURESS Y-ST-ZIP LE ME RELLADURESS LE ME RELLADURESS LE ME RELLADURESS	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.3 STR	EF ADDRESS -SI-ZIP EF EF ADDRESS -ST-ZIP EF EF ADDRESS		Cha	inge Addition
ME RELLADORESS (Y-ST-ZIP LE ME RELLADORESS (Y-ST-ZIP LE ME RELLADORESS LY-ST-ZIP LE ME RELLADORESS LY-ST-ZIP LE ME RELLADORESS LY-ST-ZIP LE ME RELLADORESS	6151 FT. KING RD.	☐ DELETE	1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.3 STR	EFT ADDRESS -SI-ZIP EFT ADDRESS -ST-ZIP EFT ADDRESS		Cha	inge Addition inge Addition inge Addition inge Addition
ME RELLADORESS Y-ST-ZIP LE ME RELLADORESS	6151 FT. KING RD.	DELETE	1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY	E ET ADDRESS -SI-ZIP E E E E E E E E E E E E E E E E E E E		Cha	inge Addition inge Addition inge Addition inge Addition
ME  IN ST. ZIP  IF  ME  ME  ME  ME  ME  ME  ME  ME  ME  M	6151 FT. KING RD.	DELETE	1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY 6.1 TITL 6.2 NAM	E ET ADDRESS -SI-ZIP E E E E E E E E E E E E E E E E E E E		Cha	ange Addition ange Addition ange Addition

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 eath; that I an 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 Brock 12 or Brock 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF ORECTOR

124196

813-782-5518

Daytime Phone #