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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

161

1. Corporation Name SCHUYLER C. METLIS M.D., P.A. Principal Place of Business Mailing Address 3385 BURNS RD PALM BCH GRONS FL 33410 PALM BCH GRONS FL 33410-4322										
							3. Date incorporated or Qualified 06/19/1980		e of Last R 6/1996	eport
Principal Place of Business			2a. Mailing	Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. FEI Number 59-2010191	1	Ar	pplied For
Suite, Apt #, etc		26 Suite. At	Suite, Apt. #, etc.				<u> </u>	Not Applicate \$8.75 Additional		
			27				5. Certificate of Status Desired			equired
City & State			}	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip		Country 25	Ζφ 29	···	Country 30	,	This corporation has liability for Florida Statutes	r intangible t		. 199.032,
1		and Address of Curi		ent	130	. 	10. Name and Address of New R			
	LLIAMS, HE				81	Name				
	01 US HWY	ONE			82	Street Add	dress (P.O. Box Number is Not Accepta	able)		
SUITE 415 N PALM BEACH FL 33408								·		
N	PALM BEAU	n FL 33400			83					
					84	City		garb g	85 Zip	Code
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office of agent. I SIGNATURE 2.	registered ag am familiar wi	ent, or both, in the Sta th, and accept the ob or printed name of registered	ate of Florida. Such illigations of, Section agent and title if applicable AND DIRECTORS	change was 607.0505, F	authorized by florida Statute: DTE: Registered Ap.	e-named cory the corpora s.	rporation submits this statement for the ation's board of directors. I hereby acculated when reinstating) ADDITIONS/CHANGES TO OFF	purpose of c ept the appo bate ICERS AND (Intment as	registered
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roo makeny cering that the information supplied with this ining does not quality for the exemption stated in Section 118.07(3)(I), Florida Statutes, if 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:

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FILED

May 01 1997 8:00am

Secretary of State