

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

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 674801 (6)
1. Corporation Name
JACK GREENER, M.D., P.A.



Principal Place of Business Mailing Address
21110 BISCAYNE BOULEVARD, SUITE 406 21110 BISCAYNE BOULEVARD, SUITE 406
MIAMI FL 33180-8240 MIAMI FL 33180-8240

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		06/25/1980	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2004057	
City & State		City & State		5. Certificate of Status Desired	
23		28 Aventura FL		X \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24		29		Trust Fund Contribution	
Country		Country		7. This corporation owes or has paid the current year Intangible	
25		30		Personal Property Tax due June 30.	
				X Yes [] No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GREENER, JACK		81 Name	
21110 BISCAYNE BOULEVARD, SUITE 406		82 Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33180		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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	[] Change [] Addition
NAME	GREENER, JACK	1.2 NAME	
STREET ADDRESS	21110 BISCAYNE BLVD, 406	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33180	1.4 CITY-ST-ZIP	
TITLE	ST	2.1 TITLE	[] Change [] Addition
NAME	ABRAMSON, I. JACK	2.2 NAME	
STREET ADDRESS	21110 BISCAYNE BLVD., 406	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33180	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	[] Change [] Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	[] Change [] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	[] Change [] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	[] Change [] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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: JACK GREENER 1/5/98 305-985-4391

CR2E034 (10/97)