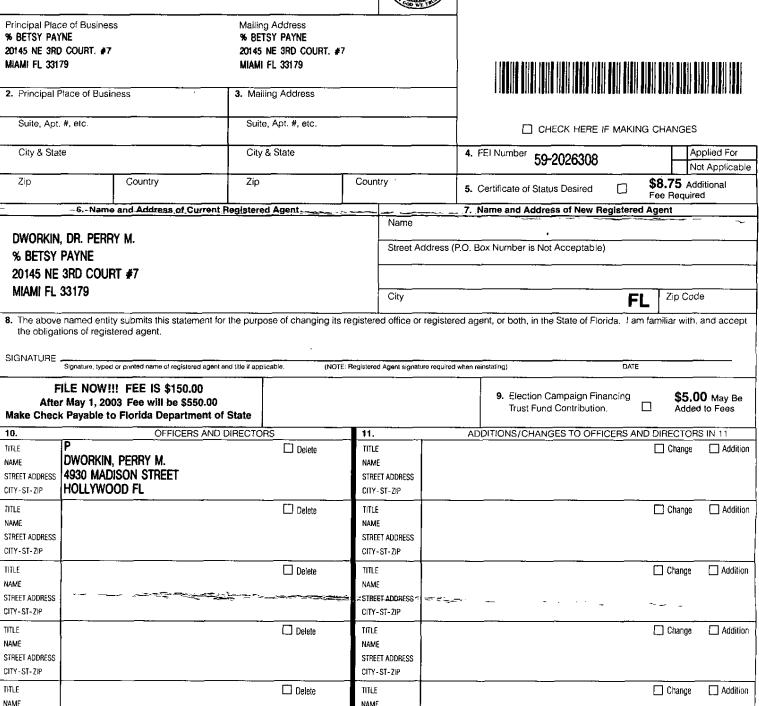
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR 682720 DOCUMENT

1. Entity Name

PERRY M. DWORKIN, D.O., P.A.



12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attai with all other like empowered

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Delete

FILED

Jan 29, 2003 8:00 am

Secretary of State

01-29-2003 90172 008 ***150.00

☐ Addition