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 # **691992** **(2)**

1. Corporate Name

MONROE NELSON BENAIM, M.D., P.A.

Principal Address

% MONROE N. BENAIM, M.D., P.A.
102 COASTAL WAY
JUPITER FL 33477-5002

Mailing Address

% MONROE N. BENAIM, M.D., P.A.
102 COASTAL WAY
JUPITER FL 33477-5002

2. Certificate Number
21
22
23
24 25

2a. Mailing Address
26
27
28
29 30

3. Date Incorporated or Qualified: **06/25/1981**

3a. Date of Last Report: **04/11/1995**

4. FEI Number: **59-2093089** — Applied For / Not Applicable

5. Certificate of Status Desired ✓ — **$8.75** Additional Fee Required

6. Electronic Corporate Financing Trust Fund Contribution [ ] — **$5.00** May Be Added to Fees

8. Does corporation have liability for enterprise tax under s. 199.032, Florida Statutes? [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

BENAIM, MONROE N., MD
102 COASTAL WAY
JUPITER FL 33477

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 Section 607.325, 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. Signature of a corporate officer or director of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the duties and responsibilities as registered agent. Florida Statutes.

Signature

12. OFFICERS AND DIRECTORS

[ ] DP
DP
BENAIN, MONROE N MD
102 COASTAL WAY
JUPITER FL

[ ] DP
[ ] DP
[ ] DP
[ ] DP
[ ] DP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title
Name
Street Address
City, State, Zip

[ ] Change [ ] Add

14. I hereby 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 above, or on an attached amendment, or on other legal documents on file with the Division of Corporations.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Date

CR2E034 (12/95)