FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731114

(5)

METATHERAPY INSTITUTE, INC.

Feb 17 1998 8:00am Secretary of State

FILED

Principal Place of Business		Mailing Ad	Mailing Address				f sadri) radba (rish)rad) rishi rishi dibir asas albit asan 41011 bishi dibit brain 1001			
27200 OLD DIX NARANJA FL 3		HOMESTEAD	POST OFFICE BOX 1330 HOMESTEAD FL 33090				3. Date Incorporated or Qualified			
US		US					4. FEI Number	T 1.	Applied For	
							23-7400277		Not Applicable	
2. Principal Place of Business 2a. Mailing Address							5. Certificate of Status Desired	,	Additional	
21		26	6				5. Certificate of Status Desired		Required	
Suite, Apt.	#, etc.	<u> </u>	pt. #, etc.				6. Election Campaign Financing) May Be	
22		27	No.				Trust Fund Contribution		to Fees	
City & Stat	le	City & S	State				7. Is this nonprofit corporation a homeowners		ion?	
23 Zip	Country	28 Zip		Cou	intra			No.	lata a alle 1 = 1	
24]	25	29		30	e iti y		This corporation owes or has paid the curr Personal Property Tax due June 30.	rent year I] Yes	Intangible No NA	
<u> </u>	9. Name and Address of C		pent	130	Г		10. Name and Address of New Registered			
	•				81	Name				
PORINS	ON, MAUREEN				اجها	Ctropt Ant-1-	ace /DO Day Number in Mat Account total			
	DQUAT AVENUE				52	Street Address (P.O. Box Number is Not Acceptable)				
1	GABLES FL 33133				83					
55,32					84	City		OF 7:	o Code	
					04	City	FL	85 Zi	b Code	
SIGNATURE	Signature, typed or printed name of register		e (NOT		d Age	nt signature require	ed when reinstaling) DATE			
12.		S AND DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PD NOON MAUDEEN		T) DECE IE	1.1 TO		ĺ		Change	Adomon	
NAME OTOSEY ADDRESS	ROBINSON, MAUREEN 3939 LOQUAT AVENUE			1.2 NA		1000500				
STREET ADDRESS :	CORAL GABLES FL			1		ADDRESS				
TITLE	VD		DELETE	1.4 CI 2.1 TII		1-21			Addition	
NAME	HERSH, ROBERT							Change		
STREET ADDRESS				- B		1		☐ Change		
D	l 13331 SW 108TH ST C#	ICI E		2.2 N	ME	ADDRESS		☐ Change	AUGILION	
CITY-ST-ZIP	13331 SW 108TH ST CIR MIAMI FL	ICLE		2.2 NJ 2.3 ST	AME REET	ADDRESS ST-ZIP		☐ Change	, Library	
CITY-ST-ZIP TITLE			DELĒTE	2.2 NJ 2.3 ST	AME TREET	ADDRESS ST-ZIP		☐ Change		
	MIAMI FL		DELETE	2.2 NJ 2.3 ST 2.4 C	ME TREET . ITY - S TLE	1				
TITLE	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI		DELETE	2.2 NA 2.3 ST 2 4 C 3.1 TH 3.2 NA	AME TREET . ITY - S TLE AME	1				
TITLE NAME	MIAMI FL STD SCHANTZ, MARGUERITE	E		2.2 NA 2.3 ST 2 4 C 3.1 TH 3.2 NA	AME TREET . TLE AME	ADDRESS		☐ Change	a Addition	
TITLE NAME STREET ADDRESS	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELETE	2.2 NJ 2.3 ST 2 4 C 3.1 TH 3.2 NA 3.3 ST	AME IREET . ITY-S TLE AME IREET . ITY-S	ADDRESS			a Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E		2.2 Nu 2.3 ST 2.4 C 3.1 TH 3.2 NA 3.3 ST 3.4 C 4.1 TH 4.2 NA	TREET : TLE AME TREET : TY-S TLE AME TREET : TLE AME	ADDRESS		☐ Change	a Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E		2.2 Nu 2.3 ST 2.4 C 3.1 TH 3.2 NA 3.3 ST 3.4 C 4.1 TH 4.2 NA	TREET : TLE AME TREET : TY-S TLE AME TREET : TLE AME	ADDRESS		☐ Change	a Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELEYE	22 NM 23 ST 2 4 C 3.1 TII 3.2 NM 3.3 ST 3.4 CI 4.1 TII 4.2 NL 4.3 ST 4.4 CI	AME IREET . ITY-S ILE ITY-S ILE AME ITY-S ILE IREET . ITY-SI	ADDRESS ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E		22 NM 23 ST 2 4 C 31 TO 32 NM 33 ST 34 CC 41 TO 4.2 NM 4.3 ST 4.4 CC 51 TO	AME ITEET ITY-S ITLE AME ITY-S ITLE AME ITY-S ITLE	ADDRESS ST-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELEYE	22 NM 23 ST 2 4 C 31 TO 32 NM 33 ST 34 CO 41 TO 42 NM 43 ST 44 CO 51 TO 52 NM	TREET. TITY-S TLE AME TREET. TITY-S TLE AME TREET. TITY-SI TLE AME	ADDRESS 11-ZIP ADDRESS 1-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELEYE	22 NM 23 ST 2 4 C 31 TO 32 NM 33 ST 34 CO 41 TO 42 NM 43 ST 44 CO 51 TO 52 NM 53 ST	THE	ADDRESS 11-2IP ADDRESS 1-7IP ADDRESS 1-ADDRESS		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELETE	22 NM 23 ST 2 4 C 31 TII 32 NM 33 ST 34 CI 41 TII 4.2 N. 4.3 ST 44 CI 51 TII 52 NM 53 ST 54 CI	AME IREET : ITY-S TLE AME IREET : ITY-S TLE AME IREET : ITY-SI TLE AME IREET : ITY-SI	ADDRESS 11-2IP ADDRESS 1-7IP ADDRESS 1-ADDRESS		Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELEYE	22 NM 23 ST 2 4 C 31 Tri 32 NM 33 ST 34 Ci 41 Tri 42 N 43 ST 44 Ci 51 Tri 52 NM 53 ST 54 Ci 61 Tri	AME IREET : ITY-S ITLE AME ITY-S ITLE AME ITY-SI ITY-SI ITY-SI ITY-SI ITY-SI ITY-SI ITY-SI ITY-SI ITY-SI	ADDRESS 11-2IP ADDRESS 1-7IP ADDRESS 1-ADDRESS		☐ Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELETE	22 NM 23 ST 2 4 C 3.1 Tri 3.2 NM 3.3 ST 4.1 Tri 4.2 N. 4.3 ST 4.4 Cr 5.1 Tri 5.2 NM 5.3 ST 5.4 Cr 6.1 Tri 6.2 NM	AME IREET ITY-S TLE AME IREET ITY-S TLE AME IREET ITY-SI TLE AME IREET ITY-SI TLE AME IREET ITY-SI TLE AME	ADDRESS IT-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	MIAMI FL STD SCHANTZ, MARGUERITE 1315 S. FIELDLARK LANI	E	DELETE	22 NM 23 ST 2 4 C 3.1 Tri 3.2 NM 3.3 ST 4.1 Tri 4.2 N. 4.3 ST 4.4 Cr 5.1 Tri 5.2 NM 5.3 ST 5.4 Cr 6.1 Tri 6.2 NM	THE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Change	Addition Addition Addition	

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 informatio 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

maure

Portinon

01/13/98

CHZEU37 (10/97)