

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95 \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$385)

1995



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 27 AM 8:51

DOCUMENT # 768420 (2)

MEDICAL ARTS BUILDING OF MELBOURNE, INC.

C/O JOHN M. CARTER
1281 S. HICKORY ST. #D
MELBOURNE FL 32901

C/O JOHN M. CARTER
1281 S. HICKORY ST. #D
MELBOURNE FL 32901

3	05/12/1983	02/11/1994
4	59-2385688	
5		\$8.75 Additional Fee Required
6		\$5.00 May Be Added to Fees
7		FILING FEE IS \$61.25
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Name and Address of Current Registered Agent

Name and Address of New Registered Agent

CARTER, JOHN M.
1281 S. HICKORY STREET, SUITE D
MELBOURNE FL 32901

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85	FL

I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the above-captioned document as the same appears in the records of the Division of Corporations, State of Florida.

Notary Public

12	D UNGER, PAT B., M.D. 1281 S. HICKORY ST. MELBOURNE FL	13	
	M CARTER, JOHN M. 1281 S. HICKORY ST. #D MELBOURNE FL		
	DT KRONMAN, BARRY S., M.D. 1281 S. HICKORY ST. MELBOURNE FL		
	D ALVAREZ, VICTOR M., M.D. 1281 S. HICKORY ST. MELBOURNE FL		
	D LANFORD, W. S., M.D. 1281 S. HICKORY ST. MELBOURNE FL		
	PD ROSE, THOMAS E. 1281 S. HICKORY ST MELBOURNE FL		

I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the above-captioned document as the same appears in the records of the Division of Corporations, State of Florida.

SIGNATURE: *Barry S. Kronman* Barry S. Kronman
PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR