

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Oct 01, 2004 8:00 am
Secretary of State

08-20-2004 90001 010 ***150.00
10-01-2004 90002 014 ***400.00

DOCUMENT # F08210

1. Entity Name
RONALD MOLLUZZO, M.D. P.A.



Principal Place of Business

2201 NE 52ND
201
LIGHTHOUSE POINT, FL 33064

Mailing Address

2201 NE 52ND
201
LIGHTHOUSE POINT, FL 33064

54073834



06142004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2041435

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WEINBERG, STEVEN A., ESQ.
FRANK, EFFMAN & WEINBERG
8000 PETERS RD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MOLLUZZO, RONALD
2201 NE 52ND ST, #201
LIGHTHOUSE POINT, FL 33064**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

Ronald Molluzzo MD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/14/04
Date

Daytime Phone #

8/11/04 :

Dear Sir:

Attachment

54073834
#F08210

My sincere apology for the inadequacy of the C.P.A. who has been doing my firms books. My office manager of 15 years gave his secretary the form that came (after sending in a coupon to receive it the mail was sent out to us) they inadvertently filed it in the back of our file. I insisted that I did not write the check to mail it & they said I did. When I asked them to go thru the chart they did & hence they retrieved the form sign to no check & not mailed. Please accept my sincere apology & update my file to keep my corporation active. I have been in practice for 24 years & this is an unexcusable error.

Thank You

Ronald M. Mazzoni

Lina Roberts



Attachment
54073834

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 25, 2004

RONALD MOLLUZZO, M.D. P.A.
2201 NE 52ND
201
LIGHTHOUSE POINT, FL 33064

pd

SUBJECT: RONALD MOLLUZZO, M.D. P.A.
Ref. Number: F08210

We have received your document for RONALD MOLLUZZO, M.D. P.A. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file the profit annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00. If a certificate of status is desired, please add an additional \$8.75

The only provision the Division of Corporations has for waiver of the \$400.00 late fee is if the annual report notice was not received. A letter stating this fact must accompany the completed annual report.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner
Senior Section Administrator

Letter Number: 104A00051873