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CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F11533

(9)

MEDICAL ARTS TRAINING CENTER, INC.

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FILED SECRETARY OF STATE CIVISION OF CORPORATIONS

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| 1   |                         |  |          |                             |             |          |                 |               |  |         |               |                |                            |
|---|-------------------------|--|----------|-----------------------------|-------------|----------|-----------------|---------------|--|---------|---------------|----------------|----------------------------|
| Principal Place   | of Business             |  | N        | lailing Address             |             |          |                 |               |  |         |               |                |                            |
| 441 S STATE RD 7 441 S STATE RD 7 MARGATE FL 33068-6934 |                         |  |          |                             |             |          |                 |               |  |         |               |                |                            |
| MANGALE FL  | 33000-0334              |  | 14       | MUNIC LE 22000-0224         | •           |          |                 | L             |  |         | IN THIS S     |                |                            |
|   |                         |  |          |                             |             |          |                 |               | 3. Date incorporated or Qua                | alified |               | e of Last F    | •                          |
| -   |                         | -,   | 1 =      |                             |             |          |                 |               | 12/23/1980                                 |         | <u> </u>      | <u>/01/199</u> |                            |
| 2. Principal Pt   | ace of Busine           | SS   | -        | . Mailing Address           |             |          |                 | - 1           | 4. FEI Number<br>59-2049078                |         |               | ⊢              | Applied For                |
| Suite, Apt.   | # etc                   |  | 26       | Suite, Apt. #, etc.         |             |          |                 |               | 35,2048070                                 |         |               |                | Not Applicable  Additional |
| 22  | #, <del>6</del> (C.     |  | 27       | Sale, Apr. #, etc.          |             |          |                 |               | 5. Certificate of Status Desi              | red     |               |                | Required                   |
| City & State  | 9                       |  | Ľ        | City & State                |             |          |                 |               | <ol><li>Bection Campaign Finance</li></ol> | cing    | _             | \$5.0          | О мау Ве                   |
| 23  |                         |  | 28       |                             |             |          |                 |               | Trust Fund Contribution                    |         |               | Adde           | d to Fees                  |
| Žip   | į                       | Country  | <u> </u> | Σp                          | <u></u>     | ar iit y |                 | į,            | 6. This corporation has liable             |         |               | ex under 5     | . 199.032,                 |
| 24  |                         | 25   | 29       |                             | 30          |          |                 | ياــــ        |  | Yes     | No            |                |                            |
| <del></del>   | 9. Name                 | and Address of Current   | Regis    | stored Agent                |             | 61       | Name            |               | 0. Name and Address of                     | New H   | egisterea     | Agent          |                            |
|   | OFB 141101              |  |          |                             |             | ا" ا     | INGUINO         |               |  |         |               |                |                            |
|   | GER, WARI<br>TH STATE ( |  |          |                             |             | 62       | Street A        | ddress        | (P.O. Box Number is Not Ac                 | ceptabl | le)           |                |                            |
|   | FL 33068                | TUAD 7   |          |                             |             | 83       |                 |               |  |         |               |                |                            |
|   |                         |  |          |                             |             | 84       | City            |               |  |         | Fi            | 85 Zi          | p Code                     |
| 11. Pursuant t  | o the provision         | on of Santings 607 0602 n                                      | od ec    | 17 1609 Florida Statuta     | e the abo   |          | named cor       | nocation      | n submits this statement for t             | he our  |               | anging its i   | registered office          |
| or register   | ed agènt, or l          | both, in the State of Florida<br>t the obligations of, Section | . Sud    | h change was authorize      | ed by the o | COLD     | oration's b     | opard of      | f directors. I hereby accept th            | e appo  | ontment as    | registered     | l agent. I am              |
| SIGNATURE _   |                         |  |          |                             | Nr. D       |          | <del> </del>    |               |  |         | DATE          |                |                            |
| 12.   | Signature hypodio       | printed name of registered agent an<br>OFFICERS AND            |          |                             | 13.         | - Again  | t signature rec | STINGED AVAIL | ADDITIONS/CHANGES TO                       | OFFIC   |               | DIRECTO        | RS IN 12                   |
| TITLE   | CD                      | OTTIOCINO 7 ITO  | <u> </u> | 31310                       | 1 17        | ITLE     |                 |               |  |         |               | Chang          |                            |
| NAME  |                         | GER, LAUREN  |          |                             | 1214        |          | 1               |               |  |         |               |                |                            |
| STREET ADDRESS  |                         | TH STATE ROAD 7  |          |                             | 135         | TREET    | ADDRESS         |               |  |         |               |                |                            |
| CITY ST ZIP   | MARGATE                 |  |          |                             |             |          | יון אַ די       |               |  |         |               |                |                            |
| TITLE   | PD                      |  |          |                             | 211         |          |                 |               | <del></del>                                |         |               | Chang          | e Addition                 |
| NAME  |                         | GER, WARREN  |          |                             | 2211        | AME      |                 |               |  |         |               |                |                            |
| STREET ADDRESS  |                         | TH STATE ROAD 7  |          |                             | 235         | TREET    | ADDRESS         |               |  |         |               |                |                            |
| CHY-ST ZIP  | MARGATE                 | FL   |          |                             | 240         | ITY - S  | T - ZiP         |               |  |         |               |                |                            |
| TITLE   | STD                     |  |          | •                           | 311         | TLE      |                 |               |  |         |               | Chang          | e Addition                 |
| NAME  | HEMEDIN                 | GER, MARGARETE   |          |                             | 32 N        | AME      |                 |               |  |         |               |                |                            |
| STREET ADDRESS  |                         | TH STATE ROAD 7  |          |                             | 335         | TREET    | ADDRESS         |               |  |         |               |                |                            |
| CHY-ST-ZIP  | MARGATE                 | FL   |          |                             | 340         | IIY · S  | 1 - ZIP         |               |  |         |               |                |                            |
| TITLE   |                         |  |          |                             | 4111        | ILE      |                 |               |  |         |               | Chang          | e Addition                 |
| NAME  |                         |  |          |                             | 421         | AME      | 1               |               |  |         |               |                |                            |
| STREET ADDRESS  |                         |  |          |                             | 435         | TREET    | ADDRESS         |               |  |         |               |                |                            |
| CITY ST ZIP   |                         |  |          |                             | 440         | 11Y · S  | 1 - 71P         |               |  |         |               |                |                            |
| TITLE   |                         |  |          |                             | 517         | TLE      |                 |               |  |         | _             | Chang          | e Addition                 |
| HAME  |                         |  |          |                             | 52 N        | AME      |                 |               |  |         |               |                |                            |
| STREET ADDRESS  | ŀ                       |  |          |                             | 538         | TREET    | ADDRESS         |               |  |         |               |                |                            |
| CITY - ST - ZIP   |                         |  |          |                             |             |          | 1 - ZIP         |               |  |         |               |                | 1-1-                       |
| TITLE   |                         | ·  | -        |                             | 611         |          |                 |               |  |         |               | Change         | o Addition                 |
| NAME  |                         |  |          |                             | 62 N        | AME      |                 |               |  |         |               |                |                            |
| STREET ADDRESS  |                         |  |          |                             | 638         | TREET    | ADDRESS         |               |  |         |               |                |                            |
| CITY+ST+71P   |                         |  |          |                             |             |          | 1 - ZIP         |               |  |         | Wester! 4     | <del></del>    | <del></del> -              |
| 14. I do hereb  | y cortify that          | the information supplied wit                                   | h this   | filing is voluntarily turn) | shod and    | door     | a not quali     | ty for th     | no exemption stated in Section             | n 110.0 | )7(3)(k), Flo | origin Statut  | los. I jurihor             |

4.1 To herous certify that in minimum on by many a voluntarial and obes in an obes in a bound in the single solution. The corrupt is a bound in the single solution of the corrupt is a bound in the single solution of the corrupt is a bound in solution. The corrupt is a conting 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 13 if changed, or point attachment with an address.

SIGNATURE

IONATURE AND TYPED OR PRINTED HAME OF BIGNING OFFICER OR DIRECTO

WARREN Hemedingen

305-5-568-3500

0111203 C

| CORPORATION ANNUAL REPORT 1995   |  |  | FLORIDA DEPARTMENT OF STATE Sandra B. Montham Secretary of State DIVISION OF CORPORATIONS |  |  |  | Ten<br>E                                  | 1                            |  | <b>-</b>                     |
|--|--|--|---|--|--|--|---|------------------------------|--|------------------------------|
| Corporatio   | MENT # F<br>CAN-RENT, INC.   | 11933  | (1)   |  |  |  |   | ŕ                            | <b>'</b> . F                                       | 7                            |
| rincipal Place<br>STANLEY /<br>721 S.W. 69<br>IIAMI FL 331   | тн ст.   |  | Mailing Address % STANLEY A DE LU 2721 S.W. 69TH CT. MIAMI FL 33155                       | GA .   |  | 3. Date Incorporated o 01/09/1981                                | NOT WRITE                                 | 3a. Date                     | ACE.<br>of Last Rep<br><b>25/1994</b>              |                              |
| . Principal P  | face of Business   | <u> </u>   | 2a. Mailing Address   | ······································   |  | 4. FEI Number<br>59-2052910                                      |   | 1 04/                        | A  | pplied For                   |
| Suite, Apt.  | #, etc.  |  | Suite, Apt. #, etc.   |  |  |  | 5 Contificate of Status Desired \$8.75 Ac |                              |  |                              |
| City & Stat  | 9  | 2  | City & State  |  |  | Bection Campaign F Trust Fund Contribut                          | -   |                              | \$5.00   | equired<br>May Be<br>to Fees |
| Žip  | Čcuni<br>25  | 2.<br> Try   | Žip   | Cour   | ıtry   | Ihis corporation has     Florida Statutes                        |   |                              |  |                              |
|  | 9. Name and Addr   |  |   |  |  | 10. Name and Addres  | <u> </u>                                  |                              | gent   |                              |
| DE HIGA  | L, STANLEY A   |  |   | Ĺ  | 81 Name  |  |   |                              |  |                              |
|  | V. 69TH CT.  |  |   | [  | 82 Street Add  | fress (P.O. Box Number is No                                     | ot Acceptable                             | e)                           |  |                              |
| MIAMI FL   | . 33155  |  |   | 7  | B3   |  |   |                              |  |                              |
|  |  |  |   | ļ  | B4 City  |  | ·   | FL                           | 85 Zip   | Code                         |
| or reaste  | red agent, or both, in the   | e State of Flooda, St  | uch change was author   | rized by the co  | re-named corporation's box   | oration submits this statemen<br>and of directors. I hereby acco | t for the purp<br>ept the appo            | oose of char<br>Intment as r | nging its requestions                              | gistered off<br>agent. I am  |
| or register<br>familiar wi   | red agent, or both, in thi<br>th, and accept the oblig<br>Signature typed or pinted name   | e State of Flonda. St<br>pations of, Section 60<br>e of registered agent and title                     | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | nzed by the co<br>es.<br>NOTE Registered /   | orporation's box   | ard of directors. I hereby acco                                  | ept the appo                              | DATE                         | egistered a  | igent. I am                  |
| or register<br>familiar wi   | red agent, or both, in the th, and accept the oblig Skinsture hood or printed name   | e State of Flonda. So<br>pations of, Section 60<br>e of registered agent and title<br>OFFICERS AND DIR | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | rized by the co<br>es.   | orporation's boo   | ard of directors. I hereby acco                                  | ept the appo                              | DATE                         | egistered a  | S IN 12                      |
| or register<br>familiar wi<br>GNATURE  | red agent, or both, in thith, and accept the oblig  Signature types or printed name  PTD  DE LUGA, STANLE  | e State of Flonda. St<br>pations of, Section 60<br>of mystered agent and title<br>OFFICERS AND DIR     | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | NOTE Repstered / 13.   | orporation's boo   | ard of directors. I hereby acco                                  | ept the appo                              | DATE                         | egistered a  | S IN 12                      |
| or register familiar with GNATURE THE THE MERCHARD REET ADDRESS  | PTD DE LUGA, STANLI 2721 S.W. 69TH C   | e State of Flonda. St<br>pations of, Section 60<br>of mystered agent and title<br>OFFICERS AND DIR     | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | NOTE Registered / 13. 1 1 III 12 NAI   | orporation's boardon's boardon's squatum requir  | ard of directors. I hereby acco                                  | ept the appo                              | DATE                         | egistered a  | S IN 12                      |
| or register<br>familiar wi<br>GNATURE  | PTD DE LUGA, STANLE 2721 S.W. 69TH C MIAMI, FL 0   | e State of Flooda. Stations of, Section 60 or rejection agent and title OFFICERS AND DIRECT A          | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | NOTE Registered / 13. 1 1 III 12 NAI   | Orporation's board or organization o | ard of directors. I hereby acco                                  | ept the appo                              | DATE DERS AND I              | egistered a  | igent. I am                  |
| or register<br>familiar wi<br>GNATURE<br>LE<br>ME<br>REET ADDRESS<br>Y-S1-ZIP<br>LE  | PTD DE LUGA, STANLE 2721 S.W. 69TH C MIAMI, FL 0 VSD DE LUGA, MARTA  | e State of Flooda. Stations of, Section 60 or repetition and into OFFICERS AND DIRECT A.               | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | NOTE Registered // 13. 11 TIT 12 NA 13 STR 14 CIT 21 TITI 22 NA  | Agent squattum required to be squattered to be squared to be squ | ard of directors. I hereby acco                                  | ept the appo                              | DATE DERS AND I              | egistered a  | S IN 12                      |
| or register familiar with GNATURE  LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS  | PTD DE LUGA, STANLE 2721 S.W. 69TH C MIAMI, FL 0 VSD DE LUGA, MARTA 2721 S.W. 69TH C   | e State of Flooda. Stations of, Section 60 or repetition and into OFFICERS AND DIRECT A.               | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | NOTE Repostered // 13. 11 TIT 12 NAI 13 STR 14 CIT 22 NAI 23 STR   | Agent squattum required to be squattered to be squared to b | ard of directors. I hereby acco                                  | ept the appo                              | DATE DERS AND I              | egistered a  | S IN 12                      |
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| OF FORTING OF THE MARKET ADDRESS TY-S1-ZIP THE MARKET ADDRESS   | PTD DE LUGA, STANLE 2721 S.W. 69TH C MIAMI, FL 0 VSD DE LUGA, MARTA 2721 S.W. 69TH C   | e State of Flooda. Stations of, Section 60 or repetition and into OFFICERS AND DIRECT A.               | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | 13. 1 1 111 12 NA 1 3 STR 24 CIT 33 TIT 32 NA 33 STI 44 CIT 41 TIT 42 NA 43 STR  | ACOMAL SQUARE SOCIAL SO | ard of directors. I hereby acco                                  | ept the appo                              | DATE DERS AND I              | DIRECTOR:  Change  Change                          | S IN 12 Addi                 |
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| or register familiar with GNATURE  LE MIE REET ADDRESS IY-S1-ZIP   | PTD DE LUGA, STANLE 2721 S.W. 69TH C MIAMI, FL 0 VSD DE LUGA, MARTA 2721 S.W. 69TH C   | e State of Flooda. Stations of, Section 60 or repetition and into OFFICERS AND DIRECT A.               | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | 13.  13.  11111  12 NA  13 SIF  21 IIII  22 NA  23 SIF  24 CIT  31 IIII  32 NA  44 CIT  41 IIII  42 NA  43 SIF  44 CIT  51 IIII  52 NA  53 SIF  54 CIT  51 IIII  52 NA  53 SIF  54 CIT  55 NA  53 SIF  | ACOME SQUARE SQU | ard of directors. I hereby acco                                  | ept the appo                              | DATE DERS AND I              | DIRECTOR:  Change  Change  Change                  | S IN 12 Addil                |
| or register familiar with GNATURE  LE MIE REET ADDRESS IY-SI-ZIP  | PTD DE LUGA, STANLE 2721 S.W. 69TH C MIAMI, FL 0 VSD DE LUGA, MARTA 2721 S.W. 69TH C   | e State of Flooda. Stations of, Section 60 or repetition and into OFFICERS AND DIRECT A.               | uch change was author<br>07.0505, Florida Statut<br>o (Lappkoble)                         | 13.  13.  11.  12.  13.  13.  14.  13.  14.  13.  14.  13.  14.  13.  14.  14  | ACOME SQUARE SQU | ard of directors. I hereby acco                                  | ept the appo                              | DATE DERS AND I              | DIRECTOR:  Change  Change  Change                  | S IN 12 Addil                |
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