Mar 04, 1999 8:00 am Secretary of State

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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **F25242**

1. Corporation Name

MAX W. LEDERMAN, M.D., P.A.

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Principal Place	of Business	Mailing A	Address				-  II	<b>Bûllûş</b> iyş <b>û</b> krabi bili	¥   0   0 8 0		1811 8181 B181 B	(BI) BIBII (BB)
21131 HIGHLAND LAKES BLVD.		_	MAX W. LEDERMAN. M.D., P.A.									
N MIAMI BEACH FL 33179			PO BOX 548				1					
US			HALLANDALE FL 33008-0548				DO NOT WRITE IN THIS SPACE					
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2. Principal Pla	ace of Business	2a, Mailir	ng Address				4. FEI Nu				<u> </u>	plied For
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Suite, Apt. #	, etc.	<u> </u>	, Apt. #, etc.				5. Certifo	ate of Status De	sired		\$8.75 / Fee Re	
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Zip	Country	Zip	-	Country	,			orporation owes		nt year in	angible □Yes	□No
24	25	29		0[				al Property Tax		distared		
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KANE	CHARLES I PA			١.	''							
KANE, CHARLES J., P.A. 301 YAMATO RD, SUITE 3160						reet Addre	ress (P.O. Box Number is Not Acceptable)					ľ
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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 information 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: