3-16-983-3337 NC FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # FA1062 121

	OENTER				SSOCIATES.	P.A.						
Principal Place of Business Mailing Address								}			4.410 B.S.11 G/G.	
5767 - 49TH ST., N . 5767 - 49TH ST., N. 8 ST PETERSBURG FL 33709 US							ŀ					
								DO NOT WRITE IN THIS SPACE				
US									Date Incorporated or Qualified			
Dinatos Place of Divinors									08/19/1981			
2. Principal Place of Business				2a. Mailing Address				1	4. FEI Number			oplied For of Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					59-2114530			Additional
22]				27				ŀ	5. Certificate of Status Desired Fee Required			
City & State				City & State					6. Election Campaign Financing		\$5.00	May Be
23				28					Trust Fund Contribution		Added	to Fees
	Zip Country					_	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
25 29 29 29 29 29 29 29 29 29 29 29 29 29					d Agent	30	Personal Property Tax due June 30. Yes				7 100	
MA						8	1 Name	,	10, 114110 2112 11211111			
KAMATH, JAYAPRAKASH K MD PA 5767 - 49TH ST., N.					8	O Charl	Á mlada a a	s (P.O. Box Number is Not Accepte	-51-1			
ST PETERSBURG, FLORIDA						*	Street	Addres	s (P.O. Box Mulliber is Not Accept	abiej		
33709					8	3						
						8	4 City				85 Zip	Code
						1) - 7			FL	. 1]
11. Pursuant office or r agent 1 a	to the provis registered ag im familiar w	sions of Sections of Sections of Section (1997) and	ons 607 0502 in the State of pt the obligati	and 607.1: f Florida S ons of, Se	508, Florida Statu uch change was ction 607.0505, F	tes, the abo authorized t lorida Statuti	ve-named by the cor es.	d corpor poration	ation submits this statement for the v's board of directors. I hereby acco	purpose o ept the app	f changing it ointment as	s registered registered
SIGNATURE	5	ren a varanti	of registered agents			V 5.12.11.1.1			when reinslating)	DATE		
12.	Signature, typec		HCERS AND			13.	gerit signaturi	9 1000/100		DAIL		
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NAME					DELETE	1.1 TITLE		T	ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR Change	S IN 12 Addition
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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 suppliemental 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.

SIGNATURE:

FILED

Mar 16 1998 8:00am

Secretary of State