F41062

800317570348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

Special Instructions to Filing Officer:

Office Use Only

*Donald Wm. Giffin, P.A.*
*Attorneys at Law*
*8855 Ninth Street North*
*St. Petersburg, Florida 33702*

*Donald Wm. Giffin*
*Michael Christopher ...*

F41062

August 7, 19

8/28

Secretary of State
Division of Corporate Records
Tallahassee, FL 32304

Re: Jayaprakash K. Kamath, M.D., P.A.

Dear Sir:

Enclosed with this correspondence are the Articles of Incorporation for the abovecaptioned corporation.

Also enclosed is a check in the amount of $63.00. Said check is for the following:

| | |
|---|---|
| Filing Fee | $15.00 |
| Capital Stock Tax | 30.00 |
| Certified Copy | 15.00 |
| Resident Agent | 3.00 |
| | $63.00 |

Please issue a Certificate of Incorporation for the above-captioned corporation.

Thank you for your continued cooperation.

Very truly yours,

DONALD WM. GIFFIN, P.A.

Donald Wm. Giffin

/lb
Encls. As Stated

8/30

| | |
|---|---|
| C. TAX | $30 |
| FILING | 15 |
| C. COPY | 15 |
| R. AGENT | 3 |
| TOTAL | $63 |
| BALANCE DUE $ | |
| REFUND $ | |

DFT

501

ARTICLES OF INCORPORATION OF

JAYAPRAKASH K. KAMATH, M.D., P.A.

F41062

The undersigned, subscriber to these Articles of Incorporation, a natural person to contract, and a Gastroenterolcgist duly licensed to render services as such under the laws of the State of Florida, hereby presents these Articles for the formation of a corporation under the Professional Service Corporation Act, and other laws of the State of Florida.

ARTICLE I

Name

The name of this corporation is JAYAPRAKASH K. KAMATH, M.D., P.A.

ARTICLE II

Nature of Business

The general nature of the business to be transacted by this corporation is:

(1) To engage in every phase and aspect of the business of rendering the same professional services to the public that a gastroenterologist, duly licensed under the laws of the State of Florida is authorized to render, but such professional services shall be rendered only through officers, employees and agents who are duly licensed under the laws of the State of Florida to practice gastroenterology therein.

(2) To invest the funds of this corporation in real estate, mortgages, stocks, bonds, or any other type of investment, and to own real and personal property necessary for the rendering of professional services.

(3) To do all and everthing necessary and proper for the accomplishment of any of the purposes or the attaining of any of the objects of the furtherance of any of the purposes enumerated in these Articles of Incorporation, or any amendments thereof, necessary or incidental to the protection and benefit

of the corporation, and in general, either alone or in association with other corporations, firms, or individuals, to carry on any lawful pursuit necessary or incidental to the accomplishment of the purposes or the attainment of the objects or the furtherance of such purposes or objects of this corporation.

(4) The foregoing paragraphs shall be construed as enumerating both objects and purposes of this corporation; and it is hereby expressly provided that the foregoing enumeration of specific purposes shall not be held to limit or restrict in any manner the purposes of this corporation otherwise permitted by law.

ARTICLE III

Capital Stock

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 5,000 shares of common stock, having a nominal or par value of One Dollar per share. None of the shares of this corporation may be issued to anyone other than an individual duly licensed to practice surgery in the State of Florida.

ARTICLE IV

Initial Capital

The amount of capital with which this corporation will begin business is $500.00.

ARTICLE V

Term of Existence

This corporation is to exist perpetually.

ARTICLE VI

Address

The initial registered office address of this corporation in the State of Florida is 8855 Ninth Street North, St. Petersburg, Florida 33709. The registered agent and resident agent for this corporation is Donald Wm. Giffin, whose address is 8855 Ninth Street North, St. Petersburg, Florida 33702. The Board of Directors may from time to time move the principal office to any other address in Florida.

## ARTICLE VII

### Directors

This corporation shall have one Director initially. The number of Directors may be increased from time to time, by By-laws adopted by the Stockholders.

## ARTICLE VIII

### Initial Director

The name and post office address of the member of the First Board of Directors is:

| Name | Address |
|---|---|
| Dr. JAYAPRAKASH K. KAMATH | 11810 Marla Lane<br>Seminole, Florida 33542 |

## ARTICLE IX

### Subscriber

The name and post office address of the subscriber of these Articles of Incorporation, who is a surgeon, duly licensed under the laws of the State of Florida to render services as such. and the number of shares he agrees to take and the value of the consideration therefor is:

| Name | Address | Number of Shares | Consideration |
|---|---|---|---|
| Dr. Jayaprakash K. Kamath | 11810 Marla Ln.<br>Seminole, FL<br>33542 | 500 | $500.00 |

## ARTICLE X

### Voting Trusts

No shareholder of this corporation shall enter into a voting trust agreement or any other type of agreement vesting in another person the authority to exercise the voting power of any or all of his shares.

ARTICLE XI

Cumulative Voting for Directors

At all elections of Directors of this corporation, each stockholder, shall be entitled to as many votes as shall equal the number of votes which (except for these provisions as to cumulative voting) he would be entitled to cast for the election of Directors with respect to his share of stock multiplied by the number of Directors to be elected, and he may cast all such votes for a single Director, or may distribute them among the number to be voted for, or for any two or more of them as he may see fit, at such time as the corporation by its By-laws may increase the number of Directors.

ARTICLE XII

Contracts

No contract or other transaction between this corporation and any other corporation shall be affected by the fact that any Director of this corporation is interested in, or is a Director or officer of, such other corporation, and any Director individually or jointly, may be a party to, or may be interested in, any contract or transaction of this corporation, or in which this corporation is interested; and no contract, or other transaction of this corporation with any person, firm or corporation, shall be affected by the fact that any Director of this corporation is a party in any way connected with such person, firm, or corporation, and every person who may become a Director of this corporation is hereby relieved from any liability that might otherwise exist from contracting with this corporation for the benefit of himself or any firm, association, or corporation in which he may be in any way interested.

ARTICLE XIII

Removal of Directors

Any Director of this corporation may be removed at any

## ARTICLE XV

### Additional Corporate Powers

In furtherance, and not in limitation of the general powers conferred by the laws of the State of Florida and of the purposes and objects hereinabove stated, this corporation shall have all and singular the following powers:

(1) This corporation shall have the power to enter into, or become a partner, in any arrangement for sharing profits, union of interest, or corporation, joint venture or otherwise, with any person, firm, or corporation to carry on any business which this corporation has the direct or incidental authority to pursue.

(2) This corporation shall have the power to deny to the holders of the common stock of this corporation any preemptive right to purchase or subscribe to any new issues of any type of stock of this corporation, and no shareholder shall have any preemptive right to subscribe to any such stock.

(3) This corporation shall have the power, at its option, to purchase and acquire any or all of its shares owned and held by any such shareholder as should desire to sell, transfer, or otherwise dispose of his shares, in accordance with the By-Laws adopted by the shareholders of this corporation setting forth the terms and conditions of such purchase; provided, however, the capital of this corporation is not impaired.

(4) This corporation shall have the power, at its option, to purchase and acquire the shares owned and held by any shareholder who dies, in accordance with the By-Laws adopted by the shareholders of this corporation setting forth the terms and conditions of such purchase; provided, however, the capital of this corporation is not impaired.

(5) This corporation shall have the power to enter into, for the benefit of its employees, one or more of the following: (1) a pension plan, (2) a profit-sharing plan, (3) a stock bonus plan, (4) a thrift and savings plan, (5) a restricted stock option plan, or (6) other retirement or incentive compensation plan.

ARTICLE XVI

Amendment

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the stock entitled to vote thereon, unless all the Directors and all the Stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made. All rights are subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation, this 11th day of August, 1981.

Jayaprakash K. Kamath

Jayaprakash K. Kamath

STATE OF FLORIDA

COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, a notary public duly authorized in the state and county above named to take acknowledgments, personally appeared:

JAYAPRAKASH K. KAMATH

to me well known to be the person described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he subscribed to these Articles of Incorporation.

WITNESS my hand and official seal in the county and state above named, this 11th day of August, 1981.

Notary Public

My Commission Expires:

Notary Public, State of Florida at Large
My Commission Expires MAY 6, 1985

APPROVED AND FILED

AUG 19 2 30 PM 1981

SECRETARY OF STATE CORPORATION DIVISION TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST—THAT JAYAPRAKASH K. KAMATH, M.D., P.A.
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA,

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF ST. PETERSBURG,
(CITY)

STATE OF FLORIDA, HAS NAMED DONALD WM. GIFFIN,
(STATE) (NAME OF RESIDENT AGENT)

LOCATED AT 6855 NINTH STREET NORTH, ST. PETERSBURG, FLORIDA 33702
(STREET ADDRESS AND NUMBER OF BUILDING, POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)

CITY OF ST. PETERSBURG, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT
(CITY)

SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE: Jayaprakash K Kamath
(CORPORATE OFFICER)

TITLE: PRESIDENT

DATE : AUGUST 1981

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE: [signature]
(RESIDENT AGENT)

DATE : AUGUST 1981

RECEIVED DEPT. OF STATE 08950 1 AUG 14 81 REVENUE

CORP. 25

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE ...

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

1982

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required —Make Checks Payable To: Secretary of State

F41062
KAMATH (JAYAPRAKASH K.), M.D., P.A.
8855 NINTH STREET NO
C/O DONALD WM. GRIFFIN
ST PETERSBURG,FLORIDA 33709

5800 49th Street, North
Suite 206
St. Petersburg
Florida 33709

59-2114530

08/19/1981

KAMATH, JAYAPRAKASH K D 11810 MARLA LANE SEMINOLE,FL

Registered Agent Information

GRIFFIN, DONALD WM
8855 NINTH ST NO
ST PETERSBURG,FLORIDA 33709

Jayaprakash K. Kamath, M.D., P.A.
5800 49th Street, North Suite 206
St. Petersburg, Florida 33709

August 20, 1981

SIGNATURE Jayaprakash K Kamath DATE 1/12/82

Registered Agent Accepting Appointment

$1.00 additional fee required for Registered Agent changes.

Signature Jayaprakash K Kamath

Date January 12, 1982

Typed Name of Signing Officer Jayaprakash K. Kamath

Title President

522-0558

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

# 1983

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

**Read Notice and Instructions on Other Side Before Making Entries**

**Filing Fee of $10 Required —Make Checks Payable To:** *Secretary of State*

F41062
KAMATH (JAYAPRAKASH K.), M.D., P.A.
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

08/19/1981 59-2114533 02/10/1982

KAMATH, JAYAPRAKASH K D/P 11810 MARLA LANE SEMINOLE, FL 0000

**Registered Agent Information**

KAMATH, JAYAPRAKASH K MD PA

5800 49TH STREET NORTH SUITE 206

33709

SIGNATURE ____________

**$3.00 additional fee required for Registered Agent changes**

Signature X Jayaprakash K Kamath Jan 25. 1983

Typed Name of Signing Officer: Jayaprakash K. Kamath Director/President 813 522-0558

F41062

JACOBS, ROBBINS, GAYNOR, HAMPP, BURNS, COLE & SHASTEEN, P.A.

TELEX 522629 JRGTPA

REFER TO FILE NO
6067/22637

One Plaza Place

December 19, 1983

Name Availability 12/22/83
Document Examiner
Updater
Updater Verifier BJK DEC 23 1983
Acknowledgement
W. P. Verifier BJK DEC 23 1983

PERSONAL & CONFIDENTIAL

Secretary of State
Corporate Records Bureau
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32301

Name change

Attention: Mrs. Jo Mynard, Supervisor
Charter Section

Gentlemen:

Re: ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF JAYAPRAKASH K. KAMATH, M.D., P.A. CHANGING ITS NAME TO "JAY K. KAMATH, M.D., GASTROENTEROLOGY & ONCOLOGY ASSOCIATES, P.A.".

Enclosed herewith is the original and one copy of the above-referenced Articles of Amendment, which we request that you file, endorse your approval of same, and return your stamped approval on the copy provided herein.

Our firm check in the amount of $15.00 is enclosed to cover your fee for this filing.

Should you have any questions regarding this filing, please call rather than returning the documents.

FILED 83 DEC 22 PM 5:09

Very truly yours,

JACOBS, ROBBINS, GAYNOR, HAMPP,
BURNS, COLE & SHASTEEN, P.A.

John H. W. Cole

JHWC:BJC
Enclosures

ARTICLES OF AMENDMENT OF THE ARTICLES OF INCORPORATION

The following article of the Articles of Incorporation of JAYAPRAKASH K. KAMATH, M.D., P.A. is hereby amended to read as follows:

"ARTICLE

"NAME

"The name of the corporation shall be:

JAY K. KAMATH, M.D., GASTROENTEROLOGY & ONCOLOGY ASSOCIATES, P.A."

The foregoing amendment was adopted by a written action of all of the directors of the corporation and by all of the stockholders of the corporation with voting rights as of July 19th, 1983.

IN WITNESS WHEREOF, the undersigned President and Secretary of the corporation have executed these Articles of Amendment this 19th day of July, 1983.

Jayaprakash K Kamath
President

[signature]
Secretary

STATE OF FLORIDA )
COUNTY OF PINELLAS) ss.:

The foregoing instrument was acknowledged before me this 19th day of July, 1983, by the President of the corporation on behalf of the corporation.

Mary Ann Vecchio
NOTARY PUBLIC

My Commission Expires:

Notary Public, Florida, State at Large
My Commission Expires March 27, 1984
Bonded thru Jedco Insurance Agency

(SEAL)

FILED

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1

CORPORATION
ANNUAL REPORT
**1984**

APR 13 1984

◄ **Read Notice and Instructions on Other Side Before Making Entries** ►

**Filing Fee of $10 Required — Make Checks Payable To Secretary of State**

1 Name and Address of Corporation Principal Office

F41062
KAMATH (JAY K.), M.D., GASTROENTEROLOGY &
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2 Enter Change of Address

Street Address

P.O. Box No

City

State

3 Date Incorporated or Qualified To Do Business in Florida: 08/19/1981

4 Federal Employer Identification Number (FEIN): 59-2114530

5 Date of Last Report: 03/31/1983

6 Names and Street Addresses of Each Officer and Director as of December 31, 1983

| | Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State |
|---|---|---|---|---|
| 1 | KAMATH, JAYAPRAKASH K | D/P | 11810 MARLA LANE | SEMINOLE, FL 33542 ~~0000~~ |

**Registered Agent Information**

7 Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5800 49TH STREET NORTH SUITE 206
ST PETERSBURG, FLORIDA
33709

8 Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on

SIGNATURE Jayaprakash K Kamath DATE 3/8/84
(Registered Agent Accepting Appointment)

**$3.00 additional fee required for Registered Agent changes.**

10 *See signature restrictions under instructions on reverse side of this form*

*I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.*
*I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath*

Signature: Jayaprakash K Kamath | Date: 3/8/84

Typed Name of Signing Officer: JAYAPRAKASH K KAMATH | Title: PRESIDENT | Telephone Number: (813) 522-0558

11 *Should you desire a certificate of status check the box below and include an additional $5 with your payment*

*CERTIFICATE OF STATUS DESIRED* ___
*$5 Additional fee required for certificates*

CCR 820 (1-84)

1985

Read Notice and Instructions on Other Side Before Making Entries

**Filing Fee of $20 Required — Make Checks Payable To** [illegible]

E41C62 3
KAMATH (JAY K.), M.D., GASTROENTEROLOGY [illegible]
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

08/19/1981 59-2124576 04/27/1984

1 KAMATH, JAYAPPRAKASH K D/P 11810 MARLA LANE SEMINOLE, FL [illegible]

2

3

4

5

6

**Registered Agent Information**

| 7. Name and Address of Current Registered Agent | 8. [illegible] |
|---|---|
| KAMATH, JAYAPRAKASH K MD PA<br>5800 49TH STREET NORTH SUITE 206<br>ST PETERSBURG, FLORIDA<br>33709 | Name<br>Street Address [illegible]<br>[illegible] |

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named [illegible] this statement for the purpose of changing its registered office or registered agent [illegible]
Such change was authorized by resolution duly adopted by its board of directors [illegible]
I hereby accept the appointment of registered agent. I am familiar with and accept the obligations [illegible]

SIGNATURE ____________________
(Registered Agent Accepting Appointment)

**$3.00 additional fee required for Registered Agent changes.**

10 See signature restrictions [illegible]

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee [illegible]
I further Certify That I Understand My Signature On This Report [illegible]
(Officer signing must be listed in Block 6)

Signature: X Jayaprakash K Kamath | Date: 4/5/85

Typed Name of Signing Officer: Jayaprakash K. Kamath | Title: President/Director

11. Should you desire a certificate of status check the box [illegible] ☐

**$5 additional fee required for a Certificate of Status**

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION ANNUAL REPORT 1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $25 Required Make Checks Payable To Secretary of State

1 Name and Address of Corporation Principal Office

F41062 3
KAMATH (JAY K.), M.D., GASTROENTEROLOGY & ONCOLO
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 08/19/1981

4 Federal Employer Identification Number FEIN: 59-2114530

5 Date of Last Report: 08/27/1986

6 Names and Street Addresses of Each Officer and Director as of December 31, 1986

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State | |
|---|---|---|---|---|
| KAMATH, JAYAPRAKASH K. | D/P | 11810 MARLA LANE | SEMINOLE, FL | 00000 |

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5800 49TH STREET NORTH SUITE 206
ST PETERSBURG, FLORIDA
33709

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on ______

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ______ DATE ______
(Registered Agent Accepting Appointment)

$5.00 additional fee required for Registered Agent changes

10 See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6)

Signature: Jayaprakash K Kamath.

Date: 2/27/87

Typed Name of Signing Officer: Jayaprakash K. Kamath, M.D.

Title: President

Telephone Number: (813) 522 0558

11 Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

CR2E004 (1/86)

# 90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT

1986

[illegible]

◀ Read Notice and Instructions on Other Side Before Making Entries ▶

**Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State***

1 Name and Address of Corporation Principal Office

F41062 3
KAMATH (JAY K.), M.D., GASTROENTEROLOGY & ONCOLO
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office (P.O. Box Number Alone is NOT Sufficient)

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

| 3 Date Incorporated or Qualified To Do Business in Florida | 4 Federal Employer Identification Number (FEI) | 5 Date of Last Report |
|---|---|---|
| 08/19/1981 | 59-2114530 | 04/12/1985 |

6 Names and Street Addresses of Each Officer and Director as of December 31, 1985

| Names of Officers and Directors 1 | Title 2 | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3 | City and State 4 | 5 |
|---|---|---|---|---|
| KAMATH, JAYAPRAKASH K | D/P | 11810 MARLA LANE | SEMINOLE, FL | 00000 |

REGISTERED AGENT INFORMATION

| 7 Name and Address of Current Registered Agent | 8 Name and Address of New Registered Agent |
|---|---|
| KAMATH, JAYAPRAKASH K MD PA<br>5800 49TH STREET NORTH SUITE 206<br>ST PETERSBURG, FLORIDA<br>33709 | Name 81<br>Street Address (Do NOT Use P.O. Box Number) 82<br>City and State 83 FL.<br>Zip Code 84 |

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on ______

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ______ DATE ______
(Registered Agent Accepting Appointment)

$1.00 additional fee required for Registered Agent changes

10 *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer signing must be listed in Block 6)

| Signature | Date |
|---|---|
| Jayaprakash K Kamath | 7/31/86 |

| Typed Name of Signing Officer | Title | Telephone Number |
|---|---|---|
| Jayaprakash K. Kamath, M.D. | President | (813) 934 2776 |

11 Should you desire a certificate of status check the box CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E034 (1/86)

F41062

# FISHER & SAULS P.A.
ATTORNEYS AT LAW


CHARLES E. FISHER (1904-1978)
BYRON T. SAULS (1904-19..)

LOUIE N. ADCOCK, JR.
RICHARD M. BAKER
WILLIAM C. BALLARD
RICHARD P. CATON
THOMAS R. CUSHMAN
DAVID C. DAVIDSON
SANDRA F. DIAMOND
ORRIN M. GOWEN
JOHN T. JASZCZAK

SUITE 701 CITY CENTER
100 SECOND AVENUE SOUTH
P.O. BOX 387
ST. PETERSBURG, FL 33731
PHONE (813) 822-2033

7843 SEMINOLE BOULEVARD
P.O. BOX 3126
SEMINOLE, FL 33542
PHONE (813) 397-1461

WESTSHORE CENTER
1715 NORTH WESTSHORE BOULEVARD
SUITE 465
TAMPA, FL 33607
PHONE (813) 875-8755

BAYONET POINT
10816 U.S. 19 NORTH
SUITE 106
PORT RICHEY, FL 33568
PHONE (813) 868-9481

GREGORY K. LAWRENCE
STEPHEN J. POWELL
D. MICHAEL SPEARS
KENNETH E. THORNTON
RONALD G. THORNTON, JR.
ALFRED W. TORRENCE, JR.
L. MARIE W. VALENTINE
JOAN LoBIANCO WALKER
DOUGLAS M. WILLIAMSON

OF COUNSEL
JOHN H. W. COLE
1140 CONNECTICUT AVE., N.W.
WASHINGTON, D.C. 20012
800-424-5838


PLEASE REPLY TO
St. Petersburg
March 24, 1987

Secretary of State
Division of Corporations
Amendment Section
Post Office Box 6327
Tallahassee, FL 32314

Re: JAY K. KAMATH, M.D., GASTROENTEROLOGY & ONCOLOGY ASSOCIATES, P.A.

Dear Sir of Madam:

Enclosed is the original and duplicate copy of the Articles of Amendment of the above-referenced corporation.

Please endorse your approval of the Articles on the duplicate copy and return same in the envelope provided for your convenience.

A check in the amount of $15.00 is enclosed to cover the filing fee.

If you have any problems with the enclosed documents, please contact the undersigned by telephone rather than returning the same.

N/C

Very truly yours,

Lynn A. Phillips

Lynn A. Phillips
Corporate Legal Assistant for
Richard M. Baker

| | |
|---|---|
| Name Availability | 3-30-87 |
| Document Examiner | VS |
| Updater | |
| Verifier | |
| Acknowledgement | VS |
| W. P. Verifyer | B |

Enclosures

cc: Mr. Jayaprakash K. Kamath

MAR 30 PH '87

FILED

ARTICLES OF AMENDMENT

OF

JAY K. KAMATH, M.D., GASTROENTEROLOGY & ONCOLOGY ASSOCIATES, P.A.

The undersigned corporation, in accordance with the Florida General Corporation Act and its Bylaws, hereby adopts the following Articles of Amendment:

ARTICLE 1: NAME

The name of the corporation is: Jay K. Kamath, M.D., Gastroenterology & Oncology Associates, P.A.

ARTICLE 2: AMENDMENT

Article 1 of this corporation's Articles of Incorporation is hereby amended (the "Amendment") in its entirety so as to read, after Amendment, as follows:

"ARTICLE 1: NAME"

The name of this corporation is: Kamath, Sreenath & Kamath, M.D.'s, Gastroenterology and Oncology Associates, P.A."

ARTICLE 3: ADOPTION

The Amendment has been adopted by written consent of all of the Directors and all of the Shareholders of the corporation, pursuant to Section 607.181(3), Florida Statutes on March 19, 1987.

The Amendment shall become effective upon filing with the Florida Secretary of State. A copy of such written consent follows these Articles of Amendment.

IN WITNESS WHEREOF, the undersigned have executed and signed these Articles of Amendment on behalf of the corporation this 19th day of March , 1987.

JAY K. KAMATH, M.D.,
GASTROENTEROLOGY & ONCOLOGY
ASSOCIATES, P.A.

By: Jayaprakash K Kamath
Jayaprakash K. Kamath-President

Attest: G Kamath
Geetha J. Kamath-Secretary

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 19th day of MARCH, 1987, by JAYAPRAKASH K. KAMATH and GEETHA J. KAMATH, as President and Secretary, respectively, of JAY K. KAMATH, M.D., GASTROENTEROLOGY & ONCOLOGY ASSOCIATES, P.A., a Florida corporation, on behalf of the corporation.

Judith G. Barrick
Notary Public - State of Florida

My Commission Expires:



LAP:mn/JKGUYS1

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

# CORPORATION ANNUAL REPORT 1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

3

F41062
KAMATH, SREENATH & KAMATH, M.D.'S GASTROENTEROLO
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

3. Date Incorporated or Qualified to Do Business in Florida: 09/19/1981

4. Federal Employer Identification Number: FEI 59-2114530

5. Date of Last Report: 03/17/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do Not Use P.O. Box Number) | City and State | Zip |
|---|---|---|---|---|
| KAMATH, JAYAPRAKASH K | D/P | ~~11610 MARLA LANE~~ 3423 Kent Place S | ~~SEMINOLE~~, FL CLEARWATER | ~~[illegible]~~ 34624 |

## REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5800 49TH STREET NORTH SUITE 206
ST PETERSBURG, FLORIDA
33709

8. Name and Address of New Registered Agent

Name 81

Street Address (Do Not Use P.O. Box Number) 82

Street Address (Do Not Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.[illegible] F.S.

SIGNATURE (Registered Agent Accepting Appointment) DATE

10. If a foreign corporation, date first transacted business in Florida

11. See signature restrictions under instruction on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer or Director signing must be listed in Block 6.

Signature: Jayaprakash K Kamath

Date: 4/20/88

Typed Name of Signing Officer or Director

Title: President

Telephone Number: 813-522-0558

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED

[redacted]

CR2E034 (1/88)

F41062

# FISHER & SAULS P.A.
ATTORNEYS AT LAW

LOUIS M. ADCOCK, JR.
RICHARD M. BAKER
WILLIAM C. BALLARD
RICHARD P. CATON
RUSSELL L. CHEATHAM, III
SANDRA F. DIAMOND
ROBERT KAPUSTA, JR.
JAMES R. MAYFIELD
THOMAS H. McLAIN, JR.
PATRICK M. O'CONNOR
MAREDYTH M. POLSON
ANTHONY J. RUSSO
D. MICHAEL SPEARS
KENNETH E. THORNTON
LAURIE W. VALENTINE
DOUGLAS M. WILLIAMSON

SUITE 701, CITY CENTER
100 SECOND AVENUE SOUTH
P.O. BOX 387
ST. PETERSBURG, FL 33731
PHONE (813) 822-2033

TELECOPIER
(813) 822-1633

TAMPA (813) 289-[illegible]

7843 SEMINOLE BOULEVARD
P.O. BOX 3190
SEMINOLE, FL 34642
PHONE (813) 397-1461

TELECOPIER
(813) 393-5408

CHARLES E. FISHER (1904-1979)
BYRON T. SAULS (1904-1978)

OF COUNSEL
JOHN H.W. COLE
P.O. BOX 1469
ANNANDALE, VA 22003-9469
(800) 443-0284

PLEASE REPLY TO
St. Petersburg
April 14, 1989

Secretary of State
Division of Corporations
Corporate Records Bureau
P. O. Box 6327
Tallahassee, FL 32314

Re: Articles of Amendment of Kamath, Sreenath & Kamath, M.D.'s, Gastroenterology and Oncology Associates, P.A.

Dear Sir or Madam:

Enclosed is the original and duplicate copy of the Articles of Amendment of the above-referenced corporation.

The duplicate copy has been executed and acknowledged by the officers in the same manner as the original. Please endorse your approval of the Articles on the duplicate copy and return same in the envelope provided for your convenience.

A check in the amount of $20.00 is enclosed to cover the filing fee.

If you have any problems with the enclosed documents, please contact the undersigned by telephone rather than returning the same.

TLL
TLL
TLI
TL

Very truly yours,

Yolanda A. Gilchrist

Yolanda A. Gilchrist
Corporate Legal Assistant
for Robert Kapusta, Jr.

YAG:lmd/kamathlaoa
Enclosure

ARTICLES OF AMENDMENT

OF

KAMATH, SREENATH & KAMATH, M.D.'S, GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES. P.A.

The undersigned corporation, in accordance with the Florida General Corporation Act and its Articles, hereby adopts the following Articles of Amendment:

1. Name: The name of this corporation is: Kamath, Sreenath & Kamath, M.D.'s, Gastroenterology and Oncology Associates, P.A.

2. Amendment: Article 1 of this corporation's Articles of Incorporation is hereby amended (the "Amendment") in its entirety so as to read, after Amendment, as follows:

"ARTICLE 1: NAME
The name of this corporation is: Gastroenterology and Oncology Associates, P.A."

3. Adoption: The Amendment has been adopted by written consent of all of the Directors and all of the Shareholders of the corporation on 4/7/89, pursuant to Section 607.181(3), Florida Statutes.

4. Effective Date: The Amendment shall become effective upon filing with the Florida Secretary of State.

IN WITNESS WHEREOF, the undersigned have executed and signed these Articles of Amendment on behalf of the corporation this 7th day of April, 1989.

KAMATH, SREENATH & KAMATH, M.D.'S,
GASTROENTEROLOGY AND ONCOLOGY
ASSOCIATES, P.A.

By: Jayaprakash K Kamath
Jayaprakash K. Kamath, as
President

Attest: Geetha J Kamath
Geetha J. Kamath, as
Secretary

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing Articles of Amendment were acknowledged before me this 7th day of April, 1984, by JAYAPRAKASH K.

KAMATH, as President, and GEETHA J. KAMATH, as Secretary of KAMATH, SREENATH & KAMATH, M.D.'S, GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A., a Florida corporation, on behalf of the corporation.

Notary Public - State of Florida

My Commission Expires:

JUDITH A. BARRICK, NOTARY PUBLIC
STATE OF FLORIDA
MY COMMISSION EXPIRES 9/19/92

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Make Checks Payable To Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

P41052 3
KAMATH, SREENATH & KAMATH, M.D.'S GASTROENTEROLO
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709

08/19/1981 | 59-2114530 | 05/05/1988

6. Names and Street Addresses of Each Officer and Director

| Title | Names of Officers and Directors | Street Address of Each | City, State, Zip |
|---|---|---|---|
| D/P | KAMATH, JAYAPRAKASH K | 2422 KENT PLACE S. | CLEARWATER, FL. 34624 |

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5800 49TH STREET NORTH SUITE 206
ST PETERSBURG, FLORIDA
33709

8. Name and Address of New Registered Agent

Name

Street Address

City and State

FL.

Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation ... for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.034, F.S.

SIGNATURE X Jayaprakash K Kamath (Registered Agent Accepting Appointment) DATE 3/24/89

10. If a foreign corporation, date first transacted business in Florida

11. See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer or Director signing must be listed in Block 6)

Signature | Date

Typed Name of Signing Officer or Director | Title | Telephone Number

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED

**FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST**

DO NOT WRITE IN THIS SPACE

# CORPORATION ANNUAL REPORT 1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Filing Fee Required — Make Checks Payable To Secretary of State

1 Name and Address of Corporation Principal Office

**F41062 3**

ZIP + 4 PRESORT

GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A.
5800 49TH STREET NORTH
SUITE 206
ST PETERSBURG, FLORIDA 33709-2141

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 08/19/1981

4 FEI Number: 59-2114530

FEI Number Applied For
FEI Number Not Applicable

Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| Title | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers) | 4 City and State |
|---|---|---|---|
| D/P | KAMATH, JAYAPRAKASH K | 2422 KENT PLACE S. | CLEARWATER, FL. |
| D/VP | SREENATH, BELUR S | 10092 WINDTREE BLVD | SEMINOLE, FI |
| D/SEC | KAMATH, GEETHA J | 2422 KENT PLACE S. | CLEARWATER, FL |
| | | | |
| | | | |
| | | | |

CHANGE OF REGISTERED AGENT OR OFFICE

7 Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5800 49TH STREET NORTH SUITE 206
ST PETERSBURG, FLORIDA
33709

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on ____________

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ____________________ DATE ____________
(Registered Agent Accepting Appointment)

10 I 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 effects as if made under oath. I further certify 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 F.S.

Signature: Jayaprakash K Kamath

Date: 3/2/1990

| Typed Name of Signing Officer or Director | Title | Telephone Number |
|---|---|---|
| Jayaprakash K. Kamath, M.D. | President | (813) 522-0558 |

If you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

**FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.**

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED
MAY 16 ??

DO NOT WRITE IN THIS SPACE

**FILING FEE OF $61.25 REQUIRED**

1. Name and Mailing Address of Corporation DOCUMENT # F41082 (3)

ZIP + 4 PRESORT

GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A.
~~5880 49TH STREET NORTH~~
~~SUITE 200~~
ST PETERSBURG, FLORIDA 33709-2110

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment

21 Street Address: 5880 49th St, North
22 P.O. Box No: Suite 105-N
23 City and State:
24 Zip Code:

3. Date Incorporated or Qualified To Do Business in Florida: 08/19/1981

4. FEI Number: 59-2114530

FEI Number Applied For
FEI Number Not Applicable

5. $8.75 CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| | Title 1 | Names of Officers and Directors 2 | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3 | City and State 4 |
|---|---|---|---|---|
| 1 | D/P | KAMATH, JAYAPRAKASH K | 2422 KENT PLACE S. | CLEARWATER, FL. |
| 2 | D/V | SREENATH, BELUR S. | 10092 WINDTREE BLVD. | SEMINOLE, FL. |
| 3 | D/S | KAMATH, GEETHA J. | 2422 KENT PLACE S. | CLEARWATER, FL. |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
~~5880~~ 5880 49TH STREET NORTH SUITE ~~200~~ 105-N
ST PETERSBURG, FLORIDA
33709

8. Name and Address of New Registered Agent

81 Name
82 Street Address 1 (Do NOT Use P.O. Box Number)
83 Street Address 2 (Do NOT Use P.O. Box Number)
84 City: FL.
85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE ________
(Registered Agent Accepting Appointment)

10. I 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. I further certify 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 6 or on an attachment with an address.

SIGNATURE Jayaprakash K Kamath DATE 5/13/91

Typed Name of Signing Officer or Director: Jayaprakash K. Kamath M.D.
Title: President
Telephone Number Daytime: (813) 522-0558

**FILING FEE OF $61.25 REQUIRED** Make Checks Payable To Secretary of State $8.75 Additional Fee required for Certificate of Status

CR2E034 (1/91)

**FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.**

CORPORATION

ANNUAL REPORT

1992

FLORIDA DEPARTMENT OF STATE

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

FILING FEE $ ... Make Payable To: Secretary of State

DOCUMENT # F41082 (3)

GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A.
5880 49TH ST NORTH
SUITE 105-H
SAINT PETERSBURG FL 33709-2142

08/19/1991

05/16/1991 59-2114530

| | | | |
|---|---|---|---|
| P | KAMATH, JAYAPRAKASH K | 2422 KENT PLACE S. | CLEARWATER, FL. |
| V | SREENATH, SELUR S. | 10002 WINDTREE BLVD. | SEMINOLE, FL. |
| S | KAMATH, GEETHA J. | 2422 KENT PLACE S. | CLEARWATER, FL. |

KAMATH, JAYAPRAKASH K MD PA
5880 49TH ST NORTH SUITE 105-H
ST PETERSBURG, FLORIDA
33709

FL

SIGNATURE Jayaprakash K Kamath 3/19/92

Jayaprakash K. Kamath President 813 522-0558

**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

APPROVED AND FILED

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
F41062 (3)

1. Corporation Name
GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A.

| Mailing Address | Principal Place of Business |
|---|---|
| ~~5880 49TH ST NORTH~~ | ~~5880 49TH ST NORTH~~ |
| ~~SUITE 105 N~~ | ~~SUITE 105 N~~ |
| ST PETERSBURG FL 33709 | ST PETERSBURG FL 33709 |

3. Date Incorporated: 08/19/1981
3a. 05/01/1993
4. FEI Number: 59-2114530
5. Certificate of Status Desired: $8.75
$5.00 May Be Added to Fees

2. Mailing Address
21 5767 49th St, N
22
23
24
25

2a. Principal Place of Business
26 5767 49th St, N
27
28
29
30

8. X

9. Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
~~5880 49TH ST NORTH SUITE 105 N~~ 5767 49th St, N.
ST PETERSBURG, FLORIDA
33709

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 FL 85

11.

SIGNATURE

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | D/P |
| NAME | KAMATH, JAYAPRAKASH K |
| STREET ADDRESS | 2422 KENT PLACE S. |
| CITY-ST-ZIP | CLEARWATER FL |
| TITLE | D/V |
| NAME | SREENATH, BELUR S. |
| STREET ADDRESS | 10002 WINDTREE BLVD. |
| CITY-ST-ZIP | SEMINOLE FL |
| TITLE | D/S |
| NAME | KAMATH, GEETHA J. |
| STREET ADDRESS | 2422 KENT PLACE S. |
| CITY-ST-ZIP | CLEARWATER FL |

13. CHANGES TO OFFICERS AND DIRECTORS

14.

SIGNATURE: Jayaprakash K Kamath 4/7/94

. File Now. Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Division of Corporations

1. DOCUMENT # F41062 (3)

GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A.
5880 49TH ST N STE 105-N
SAINT PETERSBURG FL 33709-2142

FILING FEE $200.00 — ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

3. 08/19/1981

4. 592114530

$8.75

$5.00 May Be Added to Fees

$138.75 Supplemental Fee Not Required

8. X

9. Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5880 49TH ST NORTH SUITE 105-N
ST PETERSBURG, FLORIDA
33709

10. Name and Address of New Registered Agent

FL

11. SIGNATURE

12. OFFICERS AND DIRECTORS

D/P
KAMATH, JAYAPRAKASH K
2422 KENT PLACE S.
CLEARWATER FL

D/V
SREENATH, BELUR S.
10082 WINDTREE BLVD.
SEMINOLE FL

D/S
KAMATH, C: THA J.
2422 KENT .LACE S.
CLEARWATER FL

13.

14.

SIGNATURE Jayaprakash K Kamath

Jayaprakash K Kamath — President — (813) 522-0558

**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 26 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F41062 (3)

1. GASTROENTEROLOGY AND ONCOLOGY ASSOCIATES, P.A.

5787 - 49TH ST., N.
8
ST PETERSBURG FL 33709
US

5787 - 49TH ST., N.
ST PETERSBURG FL 33709
US

3. 08/19/1981
3a. 04/20/1994
4. 59-2114530
$8.75 Additional Fee Required
$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

KAMATH, JAYAPRAKASH K MD PA
5787 - 49TH ST., N.
ST PETERSBURG, FLORIDA
33709

10. Name and Address of New Registered Agent

84 City FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, ...

SIGNATURE

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | DP |
| NAME | KAMATH, JAYAPRAKASH K |
| STREET ADDRESS | 2422 KENT PLACE S. |
| CITY-ST-ZIP | CLEARWATER FL |
| TITLE | DV |
| NAME | SREENATH, BELUR S. |
| STREET ADDRESS | 10892 WINDTREE BLVD. |
| CITY-ST-ZIP | SEMINOLE FL |
| TITLE | DS |
| NAME | KAMATH, GEETHA J. |
| STREET ADDRESS | 2422 KENT PLACE S. |
| CITY-ST-ZIP | CLEARWATER FL |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. I the undersigned certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in ...

SIGNATURE: B S Sreenath 4/20/95 (813)522-0558

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Belur S Sreenath