

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Jul 27, 1999 8:00 am**  
**Secretary of State**

07-27-1999 90025 038 \*\*\*150.00

**DOCUMENT # F42671**

1. Corporation Name

**DANIEL MAN, M.D., P.A.**

Principal Place of Business  
**851 MEADOWS ROAD  
BOCA RATON FL 33486-2348**

Mailing Address  
**851 MEADOWS ROAD  
BOCA RATON FL 33486-2348**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/31/1981**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

**59-2121175**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

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

8. This corporation owes the current year  
Intangible Personal Property.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SINGER, BERNARD, P.A.  
4700 SHERIDAN STREET, BLDG. B  
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name **BERNARD A. Singer**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**4925 SHERIDAN ST. Suite A**  
83  
84 City **Hollywood** FL 85 Zip Code **33021**

11. 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

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

(NOTE: Registered Agent signature required when reinstating)

**7/9/99**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **PSTD**  
STREET ADDRESS **MAN, DANIEL**  
CITY-ST-ZIP **851 MEADOW ROAD, #222  
BOCA RATON FL 33486-2348**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
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TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/1/99**

Date

Daytime Phone #

CR2E034 (5/99)

596601-90025-38  
F42671

LAW OFFICES  
**Bernard A. Singer, P.A.**  
BOARD CERTIFIED TAX LAWYER

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**HOLLYWOOD:**  
4925 Sheridan Street  
Suite A  
Hollywood, Florida 33021

**BOCA RATON:**  
5100 Town Center Circle  
Suite 330  
Boca Raton, Florida 33486

**TELEPHONES:**  
Hollywood/Broward: (954) 985-8600  
Boca Raton: (561) 347-0577  
Miami-Dade: (305) 892-8512  
Telecopier: (954) 985-8477  
E-Mail: [BernieSinger@lawyer.com](mailto:BernieSinger@lawyer.com)

**REPLY TO:**  
HOLLYWOOD OFFICE

July 9, 1999

Annual Reports Filings  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Ladies and Gentlemen:

Enclosed is the 1999 Annual Report for Daniel Man, M.D., P.A. along with my client's check in the amount of \$150 in payment of the annual fee.

As my client never received the first notice enclosing the form for the 1999 Annual Report, it would be greatly appreciated if you would waive any penalties in connection with this filing. My client always files timely reports to my knowledge and this inadvertent non-receipt of the report form is the reason for the lateness.

Thank you in advance for your courtesies in this matter.

Very truly yours,

**Executed In The Absence Of  
Bernard A. Singer To Expedite Mailing**

Bernard A. Singer, Esq.  
BAS/ks  
encl.  
cc: Dr. and Mrs. Daniel Man  
W:\MAN\AnnualRep.ltr2