05-24-1999 90020 041 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F44430**

1. Corporation Name

JORGE DE CARDENAS, JR., M.D., P.A.

Principal Place	of Business	М	lailing A	ddress									,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
% COSME J DE LA TORRIENTE % COSME J DE LA TORRIENTE 11760 BIRD RD STE 301 11760 BIRD RD STE 301 MIAMI FL 33175-3590 MIAMI FL 33175-3590									DO NOT WF	RITE IN THIS	SPAC	<u>E</u>		
									09/14/1981				ļ	
2. Principal P	lace of Business	2a	. Mailin	g Address					4. FEI Number			App	lied For	
21		26							59-2216913		[Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27									5. Certifcate of Status Desired		•	\$8.75 Additional Fee Required		
, City & State	e		City &	State					6. Election Campaign Financing		\$5	5. 00 N	May Be	
23		28	l						Trust Fund Contribution			dded to	Fees	
Zip 24	Country 25	29	<i>2</i> ip		Co 30	untry	<i>y</i>		This corporation owes the cu Personal Property Tax.		□Ye		□No	
	9. Name and Address of Currer	ıt Regi	stered A	Agent		1	1		10. Name and Address of New	Registered i	Agent			
CARDENAS, JORGE DE 11760 BIRD RD., STE 301 MIAMI FL 33175-3590						81 82 83	Stre		ess (P.O. Box Number is Not Accep	table)				
						84	1			FL	85	Zip C		
office of n agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	itions of	т, ъесно	in 607.0505, Fi	onua Sia	lutes	s.		d when reinstating)	DATE				
12.	OFFICERS AN	ID DIRI	ECTOR		13				ADDITIONS/CHANGES TO C	FFICERS AN				
TITLE	PSD			☐ DELETE		TITLE						iange	☐ Addition	
NAME	DE CARDENAS, JORGE					NAME								
STREET ADDRESS	6039 COLLINS AVE., PH 25						T ADDRI	ESS						
CITY-ST-ZIP	MIAMI BCH. FL 33140			DELETE	_	JIIY-S TITLE	ST-ZIP	+-				nange	Addition	
NAME						NAME							j	
STREET ADDRESS					2.3	STREE	TADDR	ESS						
CITY-ST-ZIP					2.4	CITY-	ST-ZIP							
TITLE				☐ DELETE	3.1	TITLE					□ cı	ıange	☐ Addition	
NAME					3.21	NAME							Į	
STREET ADDRESS					3.3	STREE	ET ADDR	ESS						
CITY-ST-ZIP				[] belete	_		ST-ZIP				ПC	nange	Addition	
TITLE				☐ DELETE		TITLE	-					lange		
NAME						NAME	: Et addr	ree						
STREET ADORESS							:1 AUDR ST-ZIP	233						
CITY-ST-ZIP				DELETE		TITLE	31-417	+-			C	nange	Addition	
NAME						NAME								
STREET ADDRESS					5.3	STREE	T ADDR	ESS						
CITY-ST-ZIP							ST-ZIP							
TITLE				DELETE	6.1	TITLE		\neg				nange	☐ Addition	

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE