FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	JAL REPORT 1997	Secretary DIVISION OF C		Secreta	ry of State
	MENT # F54622	2 (8)			
RICHAR	id W. Lieberman, M.D., P	.A .			
					0184
Principal Place of Business Mailing Address					410 II 410 II 814 II 010 II 840 II 019 II 100 I
4001 N OCEAN BV		4001 N OCEAN BY			
806-B BOCA RATON FL 33431		806-8 BOCA RATON FL 33431-5363			
				Date Incorporated or Qualified 12/11/1981	3a. Date of Last Report 04/15/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2144375	Not Applicable
Suite, Apt	#, elc	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	C.	City & State		6. Election Campaign Financing	\$5.00 May Be
23	and the second second section of the second	28		Trust Fund Contribution	Added to Fees
Z _i p	Country	Zip	Country 30	This corporation has liability for li Florida Statutes	njangible tax under s. 199.032, Kyes
24	9. Name and Address of Curre		30	10. Name and Address of New Reg	
LIE	BERMAN, RICHARD W.		81 Name		
4001 N OCEAN BV 806-B			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
BOCA RATON FL 33431					
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida Statute	s, the above-named corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered
agent la	im familiar with, and accept the oblig	pations of Section 607.0505, Flor	ida Statutes.	con o board of an bottom of flat boy accord	t the appointment as registeres
SIGNATURE	Signature, typed or profess name of registered ag	pent and title if applicable (NOTE	Registered Agent signature requi	ired when reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PVD	[_] DELETE	1.1 TITLE		Change L Addition
NAME CERTE AREST CO	LIEBERMAN, RICHARD W 4001 N OCEAN BV 806-B		1.2 NAME		
STREET ADDRESS ONLY-ST-ZIP	BOCA RATON FL		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
TITLE	M	DELETE	2.1 TITLE		Change Addition
NAME	LIEBERMAN, RICHARD W		2.2 NAME		
STREET ADDRESS	4001 N OCEAN BV 806-B		, 2.3 STREET ADDRESS		
CHTV-S1-ZP	BOCA RATON FL.	DOLLET	2 4 DITY-ST-ZIP		Change Addition
TITLE NAME	LIEBERMAN, RICHARD W	DELETE	31 TITLE 32 NAME		FT CHAURE FT VOCATION
STREET ADDRESS	4001 N OCEAN BV 806-B		3.3 STREET ADDRESS		
CHTY+ST+ZIP	BOCA RATON FL		3.4. CITY - ST~ ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	1		4.3 STREET ADDRESS		}
CHY-ST-ZIP TITLE	AASTERNATION TO THE PROPERTY OF THE PROPERTY O	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		-	5 2 NAME	•	
STREET ADDRESS			5 3 STREET ADDRESS		
CITY+ST-7IP			5.4 CITY-ST-ZIP	····	116. 11.7
TIPLE	}	LJ DELETE	I		L_1 unange L_1 Addition
NAME STREET ADDRESS		11000			
STREET ADDRESS CHY+ST-7IP TIBLE		DELETE	5 3 STREET ADDRESS		Change Additio
STREET ADDRESS		W. Likero un	6.3 STREET ADDRESS		

SIGNATURE:

14. If do hereby certify that the information supplied with this thing dinformation indicated on this annual report of supplements annual ram an officer or director of the corporation or the receiver or y appears in Block 12 or Block 13 if changed or on an attrichment

qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the orl is true and accurate and that my signature shall have the same legal effect as if made under oath; that empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED

Apr 03 1997 8:00am