

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F59401 (2)

1. Corporation Name

DUBERLY MAZUELOS, M. D., P. A.



Principal Place of Business

2951 NW 49TH AVE
STE 201
LAUDERDALE LAKES FL 33313
US

Mailing Address

2951 NW 49TH AV
STE 201
LAUDERDALE LAKES FL 33313
US

2. Principal Place of Business

2a. Mailing Address

21 2951 N.W. 49th Avenue
Suite, Apt. #, etc.

26 2951 N.W. 49th Avenue
Suite, Apt. #, etc.

22 Suite 204
City & State

27 Suite 204
City & State

23 Lauderdale Lakes, FL
Zip Country

28 Lauderdale Lakes, FL
Zip Country

24 33313 25 US

29 33313 30 US

9. Name and Address of Current Registered Agent

RUMIN, EDWARD R., ESQ.
2870 E OAKLAND PK. BLVD.
FT, LAUDERDALE, FL 33306

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
12/23/1981

3a. Date of Last Report
05/01/1995

4. FEI Number
59-2151533

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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 of applicant

(If title of Registered Agent Signature required when appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVS
NAME MAZUELOS, DUBERLY
STREET ADDRESS 2951 NW 49TH AVE, STE 201
CITY-ST-ZIP LAUDERHILL FL ☐ DELETE

TITLE TD
NAME MAZUELOS, DUBERLY
STREET ADDRESS 2951 NW 49TH AVE, STE 201
CITY-ST-ZIP LAUDERHILL FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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

2951 NW 49th AVE, STE 204

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2951 NW 49 AVE, STE 204

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

41996 (954) 484,9277
Date Date Filed

CR2E034 (12/95)