

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
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**

3. Date Incorporated or Qualified: **12/23/1981**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-2151533**
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

2. Principal Place of Business: **21 2951 N.W. 49th Avenue, Suite 204, City & State: 23 Lauderdale Lakes, FL, Zip: 24 33313, Country: 25 US**
2a. Mailing Address: **26 2951 N.W. 49th Avenue, Suite 204, City & State: 27 Suite 204, City & State: 28 Lauderdale Lakes, FL, Zip: 29 33313, Country: 30 US**

9. Name and Address of Current Registered Agent: **RUMIN, EDWARD R., ESQ., 2870 E OAKLAND PK. BLVD., FT. LAUDERDALE, FL 33306**

10. Name and Address of New Registered Agent: **81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, FL 85 Zip Code**

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: _____ (With Registered Agent Signature Required when Applicable) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAZUELOS, DUBERLY	1.2 NAME	
STREET ADDRESS	2951 NW 49TH AVE, STE 201	1.3 STREET ADDRESS	2951 NW 49th AVE, STE 204
CITY-ST-ZIP	LAUDERHILL FL	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAZUELOS, DUBERLY	2.2 NAME	
STREET ADDRESS	2951 NW 49TH AVE, STE 201	2.3 STREET ADDRESS	2951 NW 49 AVE, STE 204
CITY-ST-ZIP	LAUDERHILL FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

41996 (954) 484,9277
Date: _____ Dia. Fine Print: _____

CR2E034 (12/95)