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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

F61262

DOCUMENT #
1. Corporation Name

LEWIN & ABITBOL, M.D., P.A.

H 1991 (1991 1119 1119 1119		AND LOVER DIS) 1

8900 NORTH KENDALL DR. POB 562110 8900 NORTH		PO BOX 562110 8900 NORTH KENDA MIAMI FL 33256	2110 H KENDALL DR. POB 562110		3. Date Incorporated or Qualified 3a. Date of Last Facor 01/01/1982				
Principal Place	of Business	2a. Mailing Address			4. FEI Number 153066		Applied For		
		26			39-2 133000		Not Applicable		
Saite, Apt. #, €	etc.	Suite, Apt. #, etc			5. Certificate of Status Desired		.75 Additional Fee Required		
Dity & State		City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be		
'ф:	Country 25	7ip	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ✓ Yes ☐ No No. 199.032			
	9. Name and Address of Curre		1441		10. Name and Address of New R	egistered Agen	l		
			81	Name					
KTG&S REGISTERED AGENT CORPORATION			82	Street A	Street Address (P.O. Box Number is Not Acceptable)				
	TATION AVENUE						 		
PENTHO			83						
MIAMI FI	L 33133		84	City		85	Zip Code		
				ļ	poration submits this statement for the pur	FL °	<u> </u>		
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ET ADORESS	8900 N KENDALL DR			F ADDRESS	HOLLOW, ANDRE I				
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't			6.2 NAME						
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S1-ZiP	and to that the information or such	ed with this films is voluntarily for	64 City hisbed and do	oc oot oug	lify for the exemption stated in Section 119	.07(3)(k), Florida	Statutes, I further		
certify that ti	he information indicated on this ar	inual report or supplemental apr	nual report is to	ue and acc	curate and that my signature shall have the athis report as required by Chapter 607, F	same legal effec	t as if made unde		
oath; that Fa appears in E	an i an officer or director of the cor 3 ack 12 or Block 13 if changed, c	poration or the receiver of Iru/Next on an attachment with apadd	e empowered Iress.	to execute	unis report as required by Chapter 607, F	ionua Statutes; 8	полнал пр нате		
	/				2/w/aL		596-656b		
IGNATU	JRE: $ u$	OR PRINTED NAME OF SIGNING OFFICE	~ NW/		מווון א	202	110-620P		