

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G05074** (1)

1. Corporation Name

GILBERT R. WEINER, D.O., P.A.

Principal Place of Business

**4330 SHERIDAN ST. STE. 102
HOLLYWOOD FL 33021**

Mailing Address

**4330 SHERIDAN ST. STE. 102
HOLLYWOOD FL 33021**



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**WEINER, GILBERT R.
4330 SHERIDAN ST
SUITE 102
HOLLYWOOD FL 33021**

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 607.01(2) and 607.01(3)(b), 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 is 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 607.01(2), Florida Statutes.

SIGNATURE

Signature of the Agent

Signature of the Agent

Date

12. OFFICERS AND DIRECTORS

1. NAME

2. STREET ADDRESS

3. CITY-STATE-ZIP

4. TITLE

5. NAME

6. STREET ADDRESS

7. CITY-STATE-ZIP

8. TITLE

9. NAME

10. STREET ADDRESS

11. CITY-STATE-ZIP

12. TITLE

13. NAME

14. STREET ADDRESS

15. CITY-STATE-ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

19. CITY-STATE-ZIP

20. TITLE

21. NAME

22. STREET ADDRESS

23. CITY-STATE-ZIP

24. TITLE

25. NAME

26. STREET ADDRESS

27. CITY-STATE-ZIP

28. TITLE

29. NAME

30. STREET ADDRESS

31. CITY-STATE-ZIP

32. TITLE

33. NAME

34. STREET ADDRESS

35. CITY-STATE-ZIP

36. TITLE

13.

1. NAME

2. STREET ADDRESS

3. CITY-STATE-ZIP

4. TITLE

5. NAME

6. STREET ADDRESS

7. CITY-STATE-ZIP

8. TITLE

9. NAME

10. STREET ADDRESS

11. CITY-STATE-ZIP

12. TITLE

13. NAME

14. STREET ADDRESS

15. CITY-STATE-ZIP

16. TITLE

17. NAME

18. STREET ADDRESS

19. CITY-STATE-ZIP

20. TITLE

21. NAME

22. STREET ADDRESS

23. CITY-STATE-ZIP

24. TITLE

25. NAME

26. STREET ADDRESS

27. CITY-STATE-ZIP

28. TITLE

29. NAME

30. STREET ADDRESS

31. CITY-STATE-ZIP

32. TITLE

33. NAME

34. STREET ADDRESS

35. CITY-STATE-ZIP

36. TITLE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is true and correct to the best of my knowledge and belief. I further certify that the information under this heading is true and correct to the best of my knowledge and belief. I am an officer or director of the corporation and my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation and my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation and my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gilbert R. Weiner 3/28/96 x 983455

CR2E034 (12/95)