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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # G13409

1. Corporation Name				<u> </u> -	
FLORIDA	UROLOGICAL INSTITUTE, F	P.A.			
Principal Place	of Business	Mailing Address		T (ENIKI) 9961 (1000 (11%) DIBIL DAILE 1011 BIBAL D	1811 81011 01011 01011 01011 1001 
	• •	% FREDDY A. CAMUZZI. M.D.			
% FREDDY A. ( 6450 38TH AVE		6450 38TH AVE.N. STE. 110			, ,
ST PETERSBUR		ST PETERSBURG FL 33710		DO NOT WRITE IN THIS	SPACE
		•		3. Date Incorporated or Qualified 12/13/1982	
2 Principal P	ace of Business .	2a. Mailing Address		4. FEI Number	Applied For
21	200 01 20011333	26		59-2238000	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		E Contiference of Status Desired	\$8.75 Additional
22		27		5. Certifcate of Status Desired	Fee Required
City & State	e :	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zin	Country	28	Country	This corporation owes the current year Interest.	
Zip	25	29 30	- ·	Personal Property Tax.	☑Yes □No
24	9. Name and Address of Current	11	1	10. Name and Address of New Registered	Agent
	The state of the s		81 Name		
CAMUZZI, FREDDY A., M.D.  82 Street Address (P.O. Box Number is Not Acceptable)					
82 Street Address (P.O. Box Number is Not Acceptable)					
ST PETERSBURG FL 33710					
84 City				ार स्वरणार्थं विश्वविद्यास्त्रीति । स्वर्णे क्रिके स्वर्णे विद्यार स्वर्णे स्वर्णे स्वर्णे स्वर्णे स्वर्णे स्वर्णे	85 Zip Code
				FL	_ 1 . 1 . 1
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 of the purpose of ch					
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	t Florida. Such change was auth ons of Section 607.0505, Florida	onzed by the corporation Statutes.	on's board of directors. Thereby accept the appoint	Think as registered
SIGNATURE	•				<u> </u>
SIGNATORE	Signature, typed or printed name of registered agent		gistered Agent signature require		UD DUDECTODE IN 42
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
tiirE	DP	□ DELETE	1.1 TITLE	922 (9)	
NAME	CAMUZZI, FREDDY A MD		1.2 NAME		, ,
STREET ADDRESS	6450 38TH AVE. N STE.110		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33710	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE		C Descri	2.2 NAME	,	
NAME			2.3 STREET ADDRESS		
STREET ADDRESS			2.4 CITY-ST-ZIP		
CITY-ST-ZIP	The State of the S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME OF A	祝花。昨夏中,四月日   1000   10	t a	3.2 NAME		. 1
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CITY-ST-ZIP	areatena fil form		3.4. CITY-ST-ZIP		<b>在打印数事</b>
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STREET ADDRESS	35 U.Z. 1845 N. 1971 1945	The Control of the State of the Control of t	4.3 STREET ADDRESS		•
CITY-ST-ZIP	The state of the s	is manufacture to	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	The Company of the Co	
STREET ADDRESS	250.5		5.3 STREET ADDRESS	e de la companya de l	
CITY-ST-ZIP		***	5.4 CITY-ST-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , , , , , , , , , ,
TITLE	Substituting a state of the first	☐ DELETE	6.1 TITLE	•	☐ Change ☐ Addition
NAME	新的 2011 A 变力 5 元 17 17 17 17 17 17 17 17 17 17 17 17 17		6.2 NAME		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

01-25-1999 90048 038 \*\*\*150.00

727-345-2274