PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## Feb 25, 1999 8:00 am Secretary of State Katherine Harris

02-25-1999 90084 017 \*\*\*158.75



OANL N	OSENKRANTZ, M.D., P.A.									
Principal Place	e of Business	Mailing Address				: I MANUAL CONTRACTOR OF THE FO		EBRI DIBIR BADAI D	11011 01011 1001	
2000-SW-22-A		1140 KANE CONCOURSE			1	,				
BOGA-RATON		5TH FLOOR								
US		BAY HARBOR ISLAND FL 3	3154		ļ	DO NOT WRI	TE IN THIS	SPACE		
		US			3	3. Date Incorporated or Qualifed				
						12/29/1982		11.	<u></u>	
2. Principal P	Place of Business	2a. Mailing Address			1	FEI Number			plied For	
<u>21 44り</u>	8 WOODFIELD BLVD					<del>59-2244210</del>			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	<u> </u>	<b>\$8.75</b> A Fee Re	· · · · · · · · · · · · · · · · · · ·	
City & Stat	te	City & State			(	6.: Election Campaign Financing	П	\$5.00		
23 BOCA	RATON, FL =	28				Trust Fund Contribution	<u> </u>	_ Added to	o Fees	
<sup>Zip</sup> 20.1	Country	Zip	Country	/		This corporation owes the curr	ent year Inta			
24 <i>77</i> 4	25		30			Personal Property Tax.		<u>/=3 ···</u>	□No	
	9. Name and Address of Curren	t Registered Agent	81	Name	11	0. Name and Address of New F	cegisterea /	Agent		
¥∧T	Z, RICHARD L., ESQ.		101	Name						
210		82	Street	eet Address (P.O. Box Number is Not Acceptable)		able)				
COF	RAL GABLES FL 33134		83	-		out of the PA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA		-		
			84	City			FL	85 Zip C	Code	
office of r	registered agent, or both, in the state to	of Florida, Such change was au tions of Section 607 0505. Flori	tnorized by da Statute	tne corpo	Jialiona	board of directors. I hereby accep	ot the appen	illioni do log	1	
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agent. I a	am familiar with, and accept the obligat	nt and title if applicable. (NOTE. I	da Statute	s. 	in .	n reinstating)	DATE	•		100177
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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.

6.4 CITY-ST-ZIP

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Carl Rosenkran ZNN