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**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G36475

(3)

WEST & RIETH, M.D.'S, P.A.

## **FILED** Apr 23 1998 8:00am Secretary of State



		***								
Principal Place of Business Mailing Address									1821	
1001 37 ST. NO. #C 1001 37 ST. NO. #C ST PETERSBURG FL 33713 ST PETERSBURG FL 3				713			DO NOT WRITI	E IN THIS	SPACE	
							3. Date Incorporated or Qualified			
							05/01/1983			
2. Principal Place of Business 2a. Mailing Ac							4, FEI Number			Applied For
21		26	····				59-2281857			Not Applicab
Suite, Apt	#, etc	27 27	Suite, Apt #, etc			5. Certificate of Status Desired  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  7. Trust Fund Contribution  7. Added to Fees				
City & State 23		Oit)	City & State							
Zip	Country	Zip		Cour	itry		8. This corporation owes or has p	aid the cur	rent yea	r Intangible
24	[25]	29		30			Personal Property Tax due June	30.	Yes	□ No
	g. Name and Address of C	urrent Registere	d Agent				10. Name and Address of New R	gistered	Agent	
WE	EST, JAMES L			11	81	Name				
10	01 37 ST. NO. #C PETERSBURG FL 33713		Ī		82	Street Addre	Address (P.O. Box Number is Not Acceptable)			
31	retensiona re 337 13			Ī	83					
				Ī	84	City		FL	85	Zip Code
office or	I to the provisions of Sections 60' registered agent, or hoth, in the am familiar with, and accept the	State of Florida, S	luch change was	authorized	l by t	the corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose o pt the app	f changi ointmer	ng its registere I as registered
SIGNATURE	Seguators, typest or protect name of regelia	nid ageoranot fleid app	li stile (NO	If Begistered	Agan	nt signature require	d when re-installing)	DATE		
12.	OFFICER:	S AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIREC	TORS IN 12
TITLE	DP		DELETE	1.1 1111	LE				Cha	nge
NAME	WEST, JAMES L			12 NAM	ME					
	MEDI, UMMED E			72 10/0	***					
STREET ADDRESS	1001 37 ST. NO. #C					ADDRESS				
STREET ADDRESS CITY-ST-ZIP					EET A					
	1001 37 ST. NO. #C		☐ OFLETE	1.3 STR	IEET A Y-ST-				☐ Char	nge 🔲 Additio
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Indicated on this amount report or suppliemental 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: