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

Mailing Address

% THOMAS OPERCHAL

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # G48821**

Principal Place of Business

% THOMAS OPERCHAL

THOMAS OPERCHAL, M.D., P.A.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90179 002 ***150.00



	S HIGHWAY,#103 FENTON BLDG.	2375 OVERSEAS HIGHWAY,#103 FENTON BLDG. MARATHON FL 33050			DO NOT WRITE IN THIS SPAC	E	
MARATHON FL	33000	WAILATTION 1 C COOK			3. Date Incorporated or Qualifed 07/01/1983		
2 Principal Pi	lace of Business	2a. Mailing Address			4, FEI Number	Applie	d For
	lace of Business	26			59-2308460	Not A	plicable
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			-\$8	75 Addi	itional
22		27			5. Certificate of Status Desired	ee Requi	red
City & State		City & State			6. Election Campaign Financing 5	5.00 Ma	v Be
23		28				dded to F	
Zip Country		Zip Country			8. This corporation owes the current year Intangible)	
24	25 29 30				Personal Property Tax.		No
24]	9. Name and Address of Current	_ 	T		10. Name and Address of New Registered Agent		
			81	Name			
OPERCHAL, THOMAS			82	Ctrook A	ddress (P.O. Box Number is Not Acceptable)		
2375	Overseas Highway, Suite 10	3	02	Street Address (P.O. box Number is Not Acceptable)			
FENT		83			4		
MAR	ATHON FL 33050		\perp				
			84	City	Fi 85	Zip Cod	le
office or re	egistered agent, or both, in the State o	t Florida. Such change was authorize	eu by	the corpor	orporation submits this statement for the purpose of chang ation's board of directors. I hereby accept the appointment	ing its reg as regist	istered ered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida Se	atutes	•			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Register	ed Ager	nt signature rec	uired when reinstating) DATE		}
12.	OFFICERS AND				ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS	IN 12
TITLE	DP		TITLE				Addition
NAME I	OPERCHAL, THOMAS	1.2	NAME	(DERCHAL MANELLEN.		1
·	2375 OVERSEAS HWY	1.3	STREET	ADDRESS	2215 OUDISEAS HIGHWAY	_	
STREET ADDRESS			CITY-S	7.70	OPERCHAL, MAY Ellen 2375 OVERSEAS HIGHWAY MARATHON TUORIDA	330	∞
CITY-ST-ZIP	WARATION FL		TITLE	1-ZIP		nange	Addition
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NAME	•						1
STREET ADDRESS				TADDRESS	and the same state of the same		-
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TITLE			TITLE	}	Ü.	ilango), ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NAME			NAME	1	·		ŀ
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TITLE		☐ DELETE 4.1	TITLE			nange	- Addition
NAME	•	4.2	NAME				
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CiTY-ST-ZIP			CITY-S	T-ZIP			
TITLE	•	_	TITLE	ļ	Пс	hange	Addition
NAME		5.2	NAME	İ			
STREET ADDRESS		5.3	STREE	TADDRESS			
CITY+ST-ZIP	·		CITY-S	T-ZIP			
TITLE		· DELETE 6.1	TITLE			hange	☐ Addition
NAME	N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	6.2	NAME	-			ļ
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CITY-ST-ZIP		. 6.4	CITY-S	T-ZIP			
CITT-31-ZIP				 	Continue 440 07/03/3 Florida Chatatan I forthag and for the	A Ale a 1-5-	

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 informati 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.