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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G48923

1. Corporation Name

PALM BEACH HEART GROUP, P.A.

,						1888 iyi birdi biril biri biri	
Principal Place	e of Business	Mailing Address				. 888 lift Miest Glatt Statt Grät:	61811 B1811 1981
3370 BURNS R	aD .	3370 BURNS RD			\		
SUITE 106		SUITE 106					
		PAL BEACH GARDENS	3 FL 33410		<u> </u>	ITE IN THIS SPACE	
US		บร			3. Date Incorporated or Qualifed 07/08/1983		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		optied For
21		26			59-2306781		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,			\$8.75	Additional
22	<u> </u>	27			5. Certifcate of Status Desired	Fee F	Required
City & Stat	te	City & State			6. Election Campaign Financing		May Be
23	· · · · · · · · · · · · · · · · · · ·	28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes the cur		
24	25	29	30		Personal Property Tax.	⊘ Yes	□No
	9. Name and Address of Curre	ent Registered Agent		Ι	10. Name and Address of New	Registered Agent	
				81 Name			
COVARRUBIAS, EDGAR A.				82 Street Ade	dress (P.O. Box Number is Not Accept	ahla)	
	DIBURNS RD			OZ SUBELIAG	uless (F.O. Dox Humber is No. 1 tocop.	aule)	
	E 106			83			
PALI	M BEACH GARDENS FL 33410	ļ		1.1		05 7in	Cado
	,			84 City	•	FL	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida S	tatutes, the a	bove-named cor	rporation submits this statement for the tion's board of directors. I hereby acce	purpose of changing it	s registered
office or re	registered agent, or both, in the State	te of Florida, Such change w	as authorized	i by the corpora	tion's board of directors. I hereby acce	pt the appointment as r	egistered
agent, į a	im familiar with, and acceptate oblig	Jations of, Decilon Gov. 5500	, Fluida Sign	ules.		1 220 100	>
			• // -	CO = 44			•
SIGNATURE	Signature, type or printed heady registered ag	gent and title if applicable.	idout	ED G-AR Agent signature requi	COVARRUBIAS 4	DATE - 77	<u></u>
	Signature, type or printed have registered ag		idout	EDGAR	COVARRUBIAS 4	ORIC .	
SIGNATURE 12. TITLE	Signature, type or printed have registered ag	gent and title if applicable.	(NOTE: Registered	ED G-AR Agent signature requi	COVARRUBIAS 4	ORIC .	ORS IN 12
12.	Signature, type or printed framework registered as OFFICERS A	gent and title if applicable. (AND DIRECTORS	(NOTE: Registered	EDG-AR Agent signature requi	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME	OFFICERS A PD COVARRUBIAS, EDGAR A.	gent and title if applicable. AND DIRECTORS DELET	(NOTE: Registered 13. E 1.1 Tr 12 N/	EDEAR Agent signature requi	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET	(NOTE: Registered 13. E 1.1 Ti 12 No 1.3 ST	EDGAR Agent signature requi	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD COVARRUBIAS, EDGAR A.	gent and title if applicable. AND DIRECTORS DELET	(NOTE: Registered 13. E 1.1 TI 1.2 N/ 1.3 ST 1.4 CI	EDGAR Agent signature requi TLE AME TREET ADDRESS TY-ST-ZIP	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	(NOTE: Registered 13. E 1.1 TI 1.2 N/ 1.3 ST 1.4 CI E 2.1 TI	EDGAR I Agent signature requi TLE AME TREET ADDRESS TY-ST-ZIP TLE	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	13. E	EDGAR Agent signature requi	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	NOTE: Registered 13.	EDGAR Agent signature requi TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	13. E	EDGAR Agent signature requi TLE AME TREET ADDRESS TTY-ST-ZIP TREET ADDRESS TREET ADDRESS TREET ADDRESS	COVARRUBIAS 4	FICERS AND DIRECT Change	ORS IN 12 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	(NOTE: Registered 13. E 1.1 T/ 12 N/ 1.3 S1 1.4 CI E 2.1 T/ 22 N/ 2.3 S1 2.4 C	EDGAR Agent signature requi TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS	COVARRUBIAS 4	FICERS AND DIRECT	ORS IN 12 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	NOTE Registered 13.	EDGAR Agent signature requi	COVARRUBIAS 4	FICERS AND DIRECT Change	ORS IN 12 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410	NOTE Registered 13.	EDGAR Agent signature requi TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS	COVARRUBIAS 4	FICERS AND DIRECT Change	ORS IN 12 Addition
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12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410 DELET	NOTE Registered 13.	EDGAR Agent signature requi	COVARRUBIAS 4	Change	ORS IN 12 Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD COVARRUBIAS, EDGAR A. 3370 BURNS RD SUITE 106	gent and title if applicable. AND DIRECTORS DELET 33410 DELET	NOTE Registered 13.	EDGAR Agent signature required. TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	COVARRUBIAS 4	Change	ORS IN 12 Addition Addition Addition Addition
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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

STREET ADDRESS

CITY-ST-ZIP