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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

G59542

(2)

| JERON | ME H. ISAAC, M.D., P.A. | | | | | | | |
|----------------------------|--|--|--|---|---|--|---|-----------------------------|
| Principal Plac | e of Business | Mailing A | ddress | | | 1 1001111 0001 01110 10101 01111 01010 1101 | atitit ätett atett atitit äte | |
| 1830 S.OSPR SARASOTA F | EY AVE., STE.103 FL 34239 | | 1830 S.OSPREY AVE., STE.103 SARASOTA FL 34239 | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | 3. Date Incorporated or Qualified | | |
| 6 Dringland O | Place of Business | 9= Mailing | Address | | | 09/14/1983 | | 11 (170 |
| | INCO OF BUSINESS | 2a. Mailing | Audiess | | | 4. FEI Number | | pplied For ot Applicable |
| Suite, Apt. | #. etc | 26 Suite | Apt. #, etc. | | | 59-2326034 | 60 7E | Additional |
| 22 | | 27 | | | | 5. Certificate of Status Desired | | equired |
| City & Stat | e | City & State | | | | 6. Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | to Fees |
| Zip | Country | Zip | | Country | / | 8. This corporation owes or has paid | the current year in | tangible |
| 24 | 25 | 29 | | 30 | | Personal Property Tax due June 3 | | □ No |
| | 9. Name and Address of Currer | nt Registered A | gent | 81 | T \$1 | 10. Name and Address of New Regi | stered Agent | |
| | NCHEZ, ALBERT A., JR. | | | 01 | Name | | | |
| 100 SOUTH WASHINGTON BLVD. | | | | 82 | Street Add | ress (P.O. Box Number is Not Acceptable |) | |
| SA | rasota fl 33577 | | | 83 | | | <u> </u> | |
| | • | | | . 83 | | | | |
| | | | | 84 | City | | FL 85 Zip | Code |
| 11. Pursuant office or r | to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig | 2 and 607.1508 of Florida. Such ations of Sectio | , Florida Statute o change was a n 607.0505. Flo | es, the above authorized by orida Statute | l e-named cor y the corpora s. | poration submits this statement for the puration's board of directors. I hereby accept | | is registered registered |
| SIGNATURE | , , | | | | | | | |
| OIGHATOTIC | Signature, typed or printed namin of registered agr | | le (NOTE | Registered Age | ent signature requ | rired when reinstating) | DATE | |
| 12. | OFFICERS AN | D DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFICE | | |
| TITLE | PST | | □ DELETE | 1.1 TITLE | | | Change | ☐ Addition |
| NAME | ISAAC, JEROME H. | | | 1.2 NAME | | | | |
| STREET ADDRESS | 1830 S OSPREY AVE #103 | | | 1.3 STREET | - · · · · · · · · · · · · · · · · · · · | | | |
| CITY-ST-ZIP TITLE | SARASOTA FL V | | DELETE | 1.4 CITY - 5 2.1 TITLE | ST-ZIP | | Change | Addition |
| NAME | · | | C) DECENE | | | | CT CHAINGE | LT VODEROIL |
| STREET ADDRESS | ISAAC, ILEEN M. 1830 S OSPREY AVE #103 | | | 2.2 NAME | ADDOCCC | | | |
| 1 | SARASOTA FL | | | 2.3 STREET | | | | |
| CITY-ST-ZIP TITLE | OANASOTA FL | | DELETE | 2. 4 CITY - 5 3.1 TITLE | 51-21P | <u> </u> | Change | Addition |
| NAME | | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | | 3.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | | 3.4. C(TY-5 | | | | } |
| TITLE | | | DELETE | 4.1 TITLE | | | Change | Addition |
| NAME | | | | 4.2 NAME | | | | |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | | 4.4 CITY-S | T- ZIP | | | |
| TITLE | | · | DELETE | 5.1 TITLE | | | ☐ Change | Addition |
| NAME | | | | 5.2 NAME | | | • | (N |
| STREET ADDRESS | | | | 5.3 STREET | ADDRESS | | | 323 |
| CITY-ST-ZIP | · | | | 5.4 CITY - S | T-21P | | | |
| TITLE | | | DELETE | 6.1 TITLE | | 60000246 -03/23/980107 | Change | Addition |
| NAME | | | | 6.2 NAME | | _02/22/000107 _02/22/000107 | | |
| STREET ADDRESS | | | | 6.3 STREET | ADDRESS | ###150_00 | 7 040 | |

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 sympowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, you an attachment with an address.

SIGNATURE:

9413657362

FILED

Mar 23 1998 8:00am

Secretary of State