Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90113 041 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G61375

1. Corporation Name

LARRY S. CHARME, M.D., P.A.

| Principal Place of Business Mailing Address | TITUR CONTAK TUKU DEBUK DIBUK DEBUK BEDIK DEBUK DEBUK DEBUK |
|--|--|
| 9970 CENTRAL PARK BLVD 9970 CENTRAL PARK BLVD | |
| 302 302 | |
| 0007 1111011 12 00120 | WRITE IN THIS SPACE |
| US US 3. Date Incorporated or Qu | alifed |
| 09/27/1983 | |
| 2. Principal Place of Business 2a. Mailing Address 4. FEI Number | - Applied For |
| 21 26 59-2326345 | Not Applicable |
| Suite, Apt. #, etc. 5. Certificate of Status Desi | red S8.75 Additional Fee Required |
| 22 27 | |
| City & State City & State 6. Election Campaign Final | ncing \$5.00 May Be Added to Fees |
| | |
| | e current year intangible ☐ Yes ☐ No |
| 24 25 29 30 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of | |
| 81 Name | |
| CHARME, LARRY S. | |
| CHARME, LARRY S. 7406 MARGEARY BEND PLACE 9 424 NW 62 51 82 Street Address (P.O. Box Number is Not A BOSA-PATON PL 33434 BOSA-PATON PL 33434 BOSA BAYON Etc. 33496 84 City | cceptable) |
| BOGA-RATON FE 33434 PARA ODERIN 83 | |
| DOW WATER | |
| FE, 33/76 84 City | FL 85 Zip Code |
| | · · · · · · · · · · · · · · · · · · · |
| 44. Dursuper to the experience of Sections 607 0502 and 607 1508. Florida Statutes, the above-named comporation submits this statement f | or the purpose of changing its registered |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement in office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby | or the purpose of changing its registered accept the appointment as registered |
| 44 Dursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement to | or the purpose of changing its registered accept the appointment as registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | or the purpose of changing its registered accept the appointment as registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) | accept the appointment as registered |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE | accept the appointment as registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and 6ttle if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DELETE 1.1 TILE | DATE O OFFICERS AND DIRECTORS IN 12 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S 12. NAME | DATE O OFFICERS AND DIRECTORS IN 12 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE DP | DATE O OFFICERS AND DIRECTORS IN 12 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S 12. NAME | DATE O OFFICERS AND DIRECTORS IN 12 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S 7406 MAHOGANY BEND PLACE BOCA RATON FL IIILE DELETE 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S TA06 MAHOGANY BEND PLACE CITY-ST-ZIP DELETE 1.3 STREET ADDRESS CITY-ST-ZIP DELETE 2.1 TITLE NAME 2.2 NAME | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS BOCA RATON FL DELETE 2.1 TITLE NAME STREET ADDRESS TREET ADDRESS | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S TA06 MAHOGANY BEND PLACE CITY-ST-ZIP DELETE 1.3 STREET ADDRESS CITY-ST-ZIP DELETE 2.1 TITLE NAME 2.2 NAME | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DELETE ITITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS BOCA RATON FL 1.4 CITY-ST-ZIP DELETE 2.2 NAME 2.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and dtle if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DELETE 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE 1.2 NAME 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME 3.1 TITLE NAME 3.2 NAME 3.3 NAME | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and dtle if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DELETE 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS 3.3 STREET ADDRESS | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIgnature, typed or printed name of registered agent and 696 if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DELETE 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 1.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE 1.2 DELETE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE DELETE 1.1 TITLE 1 | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S THUE CHARME, LARRY S THUE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE DELETE 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.3 STREET ADDRESS 2.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE 1.1 TITLE 1.2 NAME 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE 1.1 TITLE | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE DP CHARME, LARRY S T406 MAHOGANY BEND PLACE BOCA RATON FL TITLE NAME TREET ADDRESS CITY. ST-ZIP TITLE NAME STREET ADDRESS CITY. ST-ZIP TITLE DELETE 1.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE AUTHORITY ST-ZIP TITLE AUTHORITY ST-ZIP TITLE DELETE 3.2 NAME 3.2 NAME STREET ADDRESS CITY. ST-ZIP TITLE NAME STREET ADDRESS CITY. ST-ZIP TITLE DELETE 4.1 TITLE AUTHORITY ST-ZIP | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OP OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DELETE 11.1 TILE CHARME, LARRY S 7406 MAHOGANY BEND PLACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE A3 STREET ADDRESS CITY-ST-ZIP TITLE A4 LTITLE A4 LTITLE A3 STREET ADDRESS A4 STREET ADDRESS A3 STREET ADDRESS | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and dtle if applicable. OFFICERS AND DIRECTORS 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE AS STREET ADDRESS CITY-ST-ZIP | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or priried name of registered agent and 6ttle if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 1 TITLE NAME CHARME, LARRY S 7406 MAHOGANY BEND PLACE 1.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE NAME OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STITLE STITLE NAME | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIgnature, typed or printed name of registered agent and 69 if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 1.1 TITLE AAME 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE AAME STREET ADDRESS CITY-ST-ZIP TITLE A.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE A.3 STREET ADDRESS CITY-ST-ZIP TITLE A.4 CITY-ST-ZIP TITLE A.5 STREET ADDRESS CITY-ST-ZIP TITLE A.5 STREET ADDRESS CITY-ST-ZIP TITLE A.5 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREE | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE NAME OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TITLE 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STITLE STITLE STITLE NAME | DATE O OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition |

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 effect 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)