Ollo	LFOR P	RGFIT BUSIN	CORP	ORATIO)N (UBR)
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		1/1 W	(FIAIFI . E		

DOCUMENT #

1. Entity Name

3080 N.W. 99th AVENUE SUITE 304 CORAL SPRINGS, FL 33065

G76172

2 00 1 FILED

02 APR -3 PM 3:44

SECRETARY OF STATE TALLAHASSEE. FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address As above		
Suite, Apt. #, etc. Suite, Apt. #, etc.	DO NOT WRITE IN THIS SPACE	
City & State City & State 4. FEI Number	Applied For Not Applicable	
	5. Certificate of Status Desired \$8.75 Additional Fee Required	
33063 (LSI) 7. Name and Add	ress of Current Registered Agent .	
Name C. oh a o	e Ecap I	
DO NOT-WRITE Street Address (P.O. Box Number)	(Not Acceptable)	
IN THIS SPACE	BLAFA NOE	
City Delan Re	FL Zip Code 3 4 8 3	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,	in the State of Florida.	
·		
*SIGNATURE Signature, typed or printed name of registered agent and tide if applicable, (NOTE: Registered Agent signature required when reinstating)	DATE	
9. This corporation is eligible to satisfy its Intangible 1. After May 1. Fee is \$150.00 10. Election 1. Election	- Compaign Financing #5 00 P	
Tax filing requirement and elects to do so Amended UBR is \$61,25 Trust	on Campaign Financing \$5.00 May Be Fund Contribution.	
(See criteria on back) 2 01 W Make Check Payable to Department of State!		
11. OFFICERS AND DIRECTORS		
THE LODGES STREET ADDRESS	1	
CITY-ST-ZIP 1080 110 1) AUE #309 CITY-ST-ZIP	100052101423	
TITLE COACL SP 55, 1-1. 33065 TITLE	-04/22/0201011010	
NAME NAME	****300.00 ****300.00	
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP		
THE		
NAME NAME	والمائدة المستقولي مسيمه مميا المعقب فالمستعبد إمانتها فعيش والتوايدة المريش والماريد	
STREET ADDRESS STREET ADDRESS	NOT WRITE	
CITY-ST-ZIP CITY-ST-ZIP		
TITLE NAME NAME	THIS SPACE	
NAME. NAME. STREET ADDRESS STREET ADDRESS		
CITY-ST-ZIP CITY-ST-ZIP		
TITLE .		
NAME NAME	1201	
STREET ADDRESS STREET ADDRESS CITY_ST_7IP	#K1M12	
G11-31-20	<i>H</i> , /	
THE NAME NAME	· ·	
STREET ADDRESS STREET ADDRESS		
CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i).		
	Florida Cranitae Lusthar cortifu that the information	

1/5/02



Kraemer & 3080 N.W. 99th Avenue / Suite 304 Coral Springs / Florida / 33065 Obstetrics & Gynecology Tel. 954 / 752 / 9630 Fax. 954 / 341 / 6069

Associates, P.A.

January 15, 2002

State of Florida Department of State Uniform Business Report Division of Corporations P.O. Box 1500___

Tallahassee, Fl. 32302-1500

RE: 2001 UBR

Dear Sirs:

Enclosed please find the UBR report for 2001 with the \$150.00 filing fee attached.

The reason for the lateness of this report is the non-receipt of the paperwork last year due to a move of our office. It has come to my attention that quite a bit of our mail was not forwarded as requested.

If there is any additional information that you need regarding this matter, please feel free to contact my office.

Sincerely,

ale W. Heng Elihu M. Kraemer, M. D.

EMK/sl

Encl.