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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H10763

(1)

ANGEL L. RIVERA, D.O., P.A.

FILED
May 13 1997 8:00am
Secretary of State



	of Business	Mailing Address	;						
4970 HWY 90 BLOUNTSTOWN FL 32424		RT 2 BOX 40E							
BLOUNTSTOWN US	N FL 32424		ALTHA FL 32421-9508 US						
•		••				3. Date Incorporated or Qualified 07/02/1984		e of Last F)8/1996	Report
'.	ace of Business	28. Mailing Addr	CSS			4. FET Number			pplied For
21 4976		26				59-2448004		· · · · · · · · · · · · · · · · · · ·	ot Applicable
Suite, Apt. #	•	Suite, Apt #,	, etc.			5. Certificate of Status Desired			Additional equired
City & State 23 MAR	LANNA, FL	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip		Country		8. This corporation has liability for in			s 199.032,
24 3244	7 25 45	29	3	0			Yes 🗀		
	9. Name and Address of C	Current Registered Agent				10. Name and Address of New Reg	gistered A	gent	
	VAFER JR, WALTER			81	Name				
) estancia blvd. Te 108			82	Street Add	iress (P.O. Box Number is Not Acceptab	ıle)		
	ARWATER FL 34621			83					
				84	City		FL	85 Zip	Code
44 0	a the manufacture of Curet's Co	7.01.02 ava (CC2.46.00 ft)	d. Cres s		opposit s	discondinate this 11.		11	ilo voe 'ata
SIGNATURE	o the provisions of Sections 60 egistered agent, or both, in the in familiar with, and accept the								
SIGNATURE	Signature, typed or printed name of regets Of FICE F	eri o agestiar in blic if applicable. RS AND DIRECTORS	(NOIT: F			ited when recollectig) ADDITIONS/CHANGES TO OFFIC	DATE DERS AND	DIRECTO	RS IN 12
SIGNATURE 5	Signature, typed or printed name of registr OFFICE E	eti o agest ar it tilk ilf applicable	(NOIT: F	log stored Age		ired when renellating)	DATE DERS AND		RS IN 12
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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; the Lam 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 planged or on an attachment with an endress

CIONATURE.

ugel L. Wivere

4/28/47

904-526-3626