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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H10887

(8)

VLADIMIR EINISMAN, M.D., P.A.

1217 EAST AVENUE S., SUITE 211 SARASOTA FL 34239

Principal Place of Business

1217 EAST AVENUE S.. SUITE 211 SARASOTA FL 34239

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

| | | | | | | | 3. Date Incomp 07/05/19 | orated or Qualified | | | | | |
|--------------------------------|--|--|---------------------------|---------|----------|--|--|--|-------------------------|------------------|-----------------|-----------------------|--|
| 2. Principal Place of Business | | | 2a. Mailing Address | | | | 4. FEI Number | | <u></u> | | [Appl | lied For | |
| 21 | | | 26 | | | | 59-242 | 5830 | | | | Applicable | |
| Suite, Apt. #, etc. | | | 9uite; Apt. #, etc | | | | | of Status Desired | | | 75 Ad | ditional | |
| City & State | | | City & State | | | | 0 51-25-0 | | | | <u>_</u> | | |
| 23 | | | 28 | | | 6. Election Campaign Financing Trust Fund Contribution | | | | | .00 м ded to | | |
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| 24 | 25 | 29 | | 30 |] | | , | operty Tax due June | |] Yes | | ~ | |
| | 9. Name and Addre | ss of Current Regis | tered Agent | | | | 10. Name and | Address of New Re | gistered A | gent | | | |
| EINISMAN, VLADIMIR MD | | | | | | Name | | | | | | | |
| 1217 EAST AVENUE S., SUITE 211 | | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| SARASOTA FL 34239 | | | | | | | | | | | | | |
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| _##i~~ | uant to the provisions of Sect e or registered agent, or both t. I am familiar with, and acc | in the State of Flora | da. Such change was a | autnori | بط امحة | itha aar | orporation submits this pration's board of direct | s statement for the patterns. I hereby accep | urpose of t the appo | changi intmer | ng its r | egistered gistered | |
| SIGNATU | | | | ==== | | | quired when reinstating) | | DATE | | | | |
| 12. | | FFICERS AND DIRE | | 1 | ad Age | en signature | | HANGES TO OFFIC | | DIREC | TORS | IN 12 | |
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| NAME | EINISMAN, VLADII | MIR | | 10 | NAME | | | | | _ | • | _ | |
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| CITY-ST-ZII | eby certify that the Information | on supplied with this | filing does not qualify f | or th | CITY-S | | in Section 119.07(3)(i |). Florida Statutes 1 f | urther cert | ify that | the inf | ormation | |
| indic | ated on this annual report or er or director of the corporati k 12 or Block 13 if changed, | r supplemental annua ion or the receiver or | trustee empowered to | | hơ tha | at my sig | ature shall have the sa equired by Chapter 60 | me legal effect as if I | made und | er oath | ı; that l | am an | |