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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 12 1998 8:00am Secretary of State

	MENT # H492 IR RIZWI, M.D., P.A.	222	(3)						
Principal Place	of Business	Mailir	ng Address				ibi gibil Bibil fil	EII BLOK EIGI	(0101) (00 1
13885 US #1		1388	15 US #1						
Suite 6		SUIT				DO NOT WRITE	C IN THIS SE	405	
SEBASTIAN FL	. 32958	SEB	ASTIAN FL 32958			DO NOT WRITE 3. Date Incorporated or Qualified	E IN THIS SE	ACE	
						03/26/1985			
2. Principal Pla	ace of Business	2a. M	ailing Address			4. FEI Number		TAD	plied For
id .		26	•			59-2507252			t Applicable
Suite, Apt #	#, etc.	Si	uita, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
2		27				6. Octobed of Clares Desired		Fee Re	quired
City & State)	28	ity & State			8. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
⊸ ^{Zip}	Country	, Zı	Þ	Countr	У	8. This corporation owes or has p	_		
4	25	29		30		Personal Property Tax due June] No
	9. Name and Address of Cu	urrent Hegister	ea Agent	81	Name	10. Name and Address of New R	egistered Ag	ent	
	NASIR RIZWI, M.D.			L.	Tyanto				
13885 US #1 Suite 6			82 Street Ac		Street Add	ress (P.O. Box Number is Not Accepta	ible)		
	BASTIAN FL 32958			83	3				
ĢED	MOTIMITE 32800				<u> </u>			····	
				84	City		FI.	85 Zip (Code
	o the provisions of Sections 607 ogisterod agent, or both, in the S n familiar with, and accept the o	7.0502 and 607. Stale of Florida. obligations of, S	1508, Florida Stal Such change wa ection 607,0505,	tutes, the above is authorized b Florida Statute		poration submits this statement for the fion's board of directors. I hereby acce		hanging it ntment as	s registered registered
SIGNATURE	Signature: typed or pointed name of register		plicable (N		ve-named corporates.	poration submits this statement for the fion's board of directors. I hereby acce ired when reinstating) ADDITIONS/CHANGES TO OFFI	purpose of cl ept the appoir		
SIGNATURE	Signature Typed or pointed number of register Of FICE RS	est agent and title it ap	plicable (N	IO1L Registered Ac	ve-named corporates.	red when reinstating)	purpose of cl ept the appoir DATE CERS AND D		
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4. I hereby certify that the information supplied with his 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 frue 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 of 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 changed, or on an attachment with an address.

SIGNATURE:

SIR RIZWI, M.D. PA 3/5/98 561. 589-6844