

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H81236

Corporation Name

JACK RUBIN, O.D., P.A.

Principal Place of Business

11 SW 112 AVE
MI FL 33189

Mailing Address

% JACK RUBIN
1601 ONAWAY DRIVE
MIAMI FL 33133

FILED
Sep 15, 1999 8:00 am
Secretary of State

09-15-1999 90003 032 ***550.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
Suite, Apt. #, etc.		26		10/16/1985	
City & State		27		4. FEI Number	
Zip		28		59-2569357	
Country		29		Applied For	
25		30		Not Applicable	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		5. Certificate of Status Desired	
RUBIN, JACK		81 Name		6. Election Campaign Financing	
1601 ONAWAY DRIVE		82 Street Address (P.O. Box Number is Not Acceptable)		Trust Fund Contribution	
MIAMI FL 33133		83		8. This corporation owes the current year	
		84 City		Intangible Personal Property.	
		FL		Yes No	
		85 Zip Code			

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 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)

DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PD	DELETE	1.1 TITLE	Change Addition
RUBIN, JACK	DELETE	1.2 NAME	
1601 ONAWAY DRIVE	DELETE	1.3 STREET ADDRESS	
MIAMI FL 33133	DELETE	1.4 CITY-ST-ZIP	
	DELETE	2.1 TITLE	Change Addition
	DELETE	2.2 NAME	
	DELETE	2.3 STREET ADDRESS	
	DELETE	2.4 CITY-ST-ZIP	
	DELETE	3.1 TITLE	Change Addition
	DELETE	3.2 NAME	
	DELETE	3.3 STREET ADDRESS	
	DELETE	3.4 CITY-ST-ZIP	
	DELETE	4.1 TITLE	Change Addition
	DELETE	4.2 NAME	
	DELETE	4.3 STREET ADDRESS	
	DELETE	4.4 CITY-ST-ZIP	
	DELETE	5.1 TITLE	Change Addition
	DELETE	5.2 NAME	
	DELETE	5.3 STREET ADDRESS	
	DELETE	5.4 CITY-ST-ZIP	
	DELETE	6.1 TITLE	Change Addition
	DELETE	6.2 NAME	
	DELETE	6.3 STREET ADDRESS	
	DELETE	6.4 CITY-ST-ZIP	

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 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:

JACK RUBIN

09/08/99

365-253-9038

CR2E034 (5/99)