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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # H86128

HEM./ONC. ASSOCIATES, P.A.

(6)

## **FILED** Apr 09 1997 8:00am Secretary of State

Principal Place of Business 3599 UNIVERSITY BLVD 8. #1200 JACKSONVILLE FL 32216		Mailing Address 3599 UNIVERSITY BLVD 8. #1200 JACKSONVILLE FL 32216-4288				
			3. Date Incorporated or Qualified 11/19/1985	3a. Date of Last f		
2. Principal Place of Business	28. Mailing Address		4. FEI Number	<del>}</del>	pplied For	
I <u>∫</u> Suite, Apt. #, ∈tc			59-2626740	60 75	ot Applicable Additional	
Buns, Apr. 4, Cits	27		5. Certificate of Status Desired	1	equired	
City & State	City & State		6. Election Campaign Financing		May Be	
	28		Trust Fund Contribution		to Fees	
Zip Country	/ Zip	Country	8. This corporation has liability for	intangible tax under s Yes \(\sum \) No	s. 199.032,	
9. Name and Addres	29   ss of Current Registered Agent	30	Florida Statutes  10. Name and Address of New Re		<del></del>	
COLD, KATHLEEN H		81 Name				
ONE INDEPENDENT DRI	<b>NE</b>	82 Street Add	fress (P.O. Box Number is Not Accepta	hle)		
SUITE 2301	-		and the state of t			
JACKSONVILLE FL 3220	)2	83				
		84 City		FL 85 Zip	Code	
office or registered agent, or both, agent if am familiar with, and according	ions 607,0502 and 607,1508, Florida Stat , in the State of Florida. Such change was opt the obligations of, Section 607,0505,	s authorized by the corpora Florida Statutes.	ation's board of directors. I hereby acce	pt the appointment as	registered	
IGNATURE TO A CONTRACT OF THE CONTRACT OF T	of country. A poor and the if Applicable.	OTE Designed Agent a product to a	drad when colectation)	DATE		
Sign time, by writer pointed name	of register, diagent and title if applicable. (N	OTE Registered Agent signature requ	uired when reinstaling) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTO	RS IN 12	
Sign true tyre it or pointed mone 2. Of the PD	FFICERS AND DIRECTORS  DELETE					
Significate by entire principal name  PD  JADEJA, JASWAN	FICERS AND DIRECTORS  DELETE  T, MD	13.		CERS AND DIRECTO		
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF PRECIOR / SCC - TREAS.

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