FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H93824

(1)

RICHARD B. ESACK, D.O., P.A.

FILED Feb 06 1997 8:00am Secretary of State

			I

Principal Place of Business		Mailing Address	Mailing Address							
1930 NE 47TH ST., SUITE 308 FT. LAUDERDALE FL 33308		1830 NE 47TH ST., SUITE 308 FT. LAUDERDALE FL 33308-7729								
						3. Date incorporated or Qualified 01/13/1986		ate of Last R 11/1996	leport	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		 	pplied For	
21		26				59-2704105 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #. etc.				5. Certificate of Status Desired	S8.75 Additional Fee Required			
City & State	>	City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees	
Zip 24	Country 25	Z ip 29	Count	ry 			Yes [) No	i. 199.032,	
	9. Name and Address of Curr	ent Registered Agent				Name and Address of New Re	gistered /	Agent		
	nkman, douglas		В	1 Nam	e					
C & S BUILDING, SUITE 1611 1 FINANCIAL PLAZA			B	2 Stree	et Address	dress (P.O. Box Number is Not Acceptable)				
	RT LAUDERDALE FL 33394		В	3			·		-	
1			8	4 City			F*1	85 Zip	Code	
					,		FL	<u> </u>		
11. Pursuant t office or re	to the provisions of Sections 607.0: eaistered agent, or both, in the Sta	502 and 607.1508, Florida Stat te of Florida. Such change was	utes, the abo s authorized l	ve-name ov the co	ed corpora orporation	ation submits this statement for the a 's board of directors. I hereby acce	ourpose of ot the app	changing it ointment as	ts registered realstered	
agent Lai	m familiar with, and accept the obt	igations of, Section 607.0505, I	Florida Statut	es.	,	•	, ,			
SIGNATURE			OTE: Registered A			de la lateratura	DATE			
12.	Signature, typicd or printed name of registered a OFFICERS A	ND DIRECTORS	13.	gent signat	ora redoleac A	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	
TITLE	PST	DELETE	1.1 TITLE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2011071110	Change	Addition	
NAME	ESACK, RICHARD B.	_	1.2 NAM	E	1					
STREET ADORESS	2716 NE 16TH ST			- Et addres	s					
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY							
TITLE	D	☐ DELETE	2.1 TITLE					Change	Addition	
NAME	ESACK, RICHARD B.		2.2 NAM	Ε,						
STREET AUDRESS	2716 NE 16TH ST		2.3 STRE	et addres	s					
CITY-ST-ZIP	FT. LAUDERDALE FL		2 4 C(T)	- ST - ZIP						
TITLE		☐ DELETE	31 TITLE					Change	Addition	
NAME			32 NAM	E						
STREET ADDRESS			3 3 STRE	ET ADDRES	s			•		
CITY-ST-7IP			3.4. C(T)	- ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAN	1E	İ					
STREET ADDRESS			4.3 STRE	ET ADDRES	S					
CITY-ST-7IP			4.4 CITY	- ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE	:				Change	☐ Addition	
NAME			5.2 NAM	E						
STREET ADDRESS			5.3 STRE	ET ADDRES	is					
CITY-ST-ZIF		- Ariese	5.4 CITY		<u> </u>	· · · · · · · · · · · · · · · · · · ·		T 1 65		
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAM							
STREET ADDRESS				ET ADORES	is	•	•			
CITY-ST-ZIF	or one for the falls, in farment as	the durith this filter dose	6.4 City		n atatad I-	Cootion 110 07/2\(i)\ Elevido Statut		r costificate	t the	

4. I do 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 filing fundar 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 director of the corporation or five receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12. Block 13 if changing of an antagament with a fladdress.

SIGNATURE

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

1CHAROB. ESACK 3/ JANG

93749 Daytime Phone #