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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

NORTH MIAMI BEACH FL 33162

1580 N.E. 162ND STREET

SUITE #600



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J15833

(3)

1590 N.E. 162ND STREET SUITE #600 NORTH MIAMI BEACH FL 33162-4759

Mailing Address

TERRENCE L. IBBS, D.O., P.A.

| FILED | | | | | | | | | |
|--------------------|--|--|--|--|--|--|--|--|--|
| Mar 28 1997 8:00am | | | | | | | | | |
| Secretary of State | | | | | | | | | |

0221266

3. Date Incorporated or Qualified 3a. Date of Last Report

| | | | | | 05/22/1986 | 04/2 | 04/23/1996 | | | |
|---|--|--|--------------------------------|---|--|---------------------------------------|--------------------------------|----------------------------|--|--|
| 2, Principal P | lace of Business | 2a. Mailing Address | | ···· | 4. FEI Number | | Ap | plied For | | |
| 21 | | 26 | | | 59-2679241 | | No. | t Applicable | | |
| Suite, Apt | City & State City & State | | | | 5. Certificate of Status Desire | d 🗆 | \$8.75 A | | | |
| | | | | - 100 | Election Campaign Financi Trust Fund Contribution | ng | \$5.00 Added t | | | |
| Zip | Country | Zip | Country | / | 8. This corporation has liabilit | | | | | |
| 24 | 25 | 29 | 30 | • | Florida Statutes | Yes [| | 199.032, | | |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of Ne | | | | | |
| | | | | | | | | | | |
| | S, TERRENCE L. | | | 81 Name | | | | | | |
| | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | TE #600 | | 83 | P2 | | | | | | |
| NO | RTH MIAMI BEACH FL 33162 | | " | | | | | | | |
| | | | | | 71 | FL | 85 Zip (| Code | | |
| 11. Pursuant office or r agent. La SIGNATURE | to the provisions of Sections 607 05 registered agent, or both, in the Stat im familiar with and accept the obli- | e of Florida Such change was gations of, Section 607,0505, Fl | authorized b lorida Statute | y the corporal s. | tion's board of directors. I hereby | accept the app | changing it ointment as | s registered registered | | |
| | Signature, Specifier punied name of registered as | | | ent signature requi | red when reinstating) | DATE | DIDECTOR | | | |
| 12, | p | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO | JFFICERS AND | Change | Addition | | |
| 101.8 | PST | ר"ו מנרכונ | 1.1 TITLE | ļ | | | L_ Change | M VOOIIION | | |
| NAME | IBBS, TERRENCE L. | | 12 NAME | | | | | | | |
| STREET APORESS | 1590 NE 162 ST #600 | | 1.3 STREE | T ADDRESS | | | | 1 | | |
| CHY-SI-ZIP | N MIAMI BCH FL | | 1.4 CITY - 3 | ST-ZIP | | | | | | |
| TIFLE | D | DELETE | 2.1 TITLE | Į | | | Change | Addition | | |
| NAMÉ | IBBS, TERRENCE L. | | 2.2 NAME | | | | | | | |
| STREET ACHORESS | 1590 NE 162 ST #600 | | 23 STREE | T ADDRESS | | | | | | |
| 011 y - \$1 - 2# | N MIAMI BCH FL | | 2.4 DITY- | ST-ZIP | | | | | | |
| MILE | | DELETE | 3.1 TITLE | | | | Change | Addition | | |
| NAME | | | 3.2 NAME | . | | | | | | |
| STREET ADDRESS | 1 | | 3.3 STREE | T ADDRESS | | | | } | | |
| CHY+S1-ZIP | | | 34. CITY- | | | | | ļ | | |
| TITLE | | DELETE | 41 TITLE | 31 211 | | | Change | Addition | | |
| NAME | } | L | 4. 2 NAME | Ì | 1 | | | | | |
| 1 | 1 | E | | } | • | | | ľ | | |
| STREET ACERESS | | | | T ADDRESS | | | | | | |
| C-1Y - S1 - 7IP | | DELETE | 4.4 CITY - | ST-ZIP | | | Change | Addition | | |
| TOLE | İ | · L.J DELETE | 5 1 TITLE | · . | | | - CHARRIGE | [_] Addition | | |
| NAME | 1 | | 52 NAME | | and the second | | | İ | | |
| STREET ADORESS. | 1 | • | 1 | T ADDRESS | 0.00 | | | | | |
| C/TY - S' - 7/P | | | 5 4 CITY - | ST-ZIP | | | | | | |
| 1411.6 | | ☐ DETELE | 6.1 TITLE | | • • | | Change | Addition | | |
| NAME: | | | 6.2 NAME | } | | | | 1 | | |
| STREET ADDRESS | į | | 63 STREE | T ADDRESS | | | | | | |
| Offy S1-Zin | | | 6.4 CITY- | ST-ZIP | | | | | | |
| 14. I do here | by certify that the information suppli | ed with this filing does not qual | ify for the ex- | emption state | d in Section 119.07(3)(i). Florida S | atutes. I further | certify that | the | | |
| Lamian o | ori indicated on this annual report or ifficer or a rector of the corporation of in Block 12 or Block 13 if changed, | or the receiver or trustee empor | wered to exe | urate and that cute this repo | t my signature shall have the same rt as required by Chapter 607, Flo |) legal effect ás rida Statutés; a | ; if made uni .nd that my r | per oath; that hame | | |